1.1 Introduction
The Leprosy Mission Trust India expects the highest standards of professional practice in all our work and contact with people - particularly with children, young people and vulnerable adults. Safeguarding is a corporate and an individual responsibility. All trustees, members of staff, volunteers, contractors and other TLMTI representatives (both paid and voluntary, employed or otherwise) (referred to collectively as ‘staff’ in this policy) will be made familiar with the need for concern for safeguarding, in particular, children and vulnerable adults, and also our colleagues, beneficiaries and communities we otherwise come into contact with, in all that we do.

1.2 Policy Statement
This policy relates to safeguarding of children and vulnerable adults. However, in the broader context, TLMTI and its trustees are also committed to proactively safeguarding and promoting the welfare of the charity’s beneficiaries and staff and taking reasonable steps to ensure that beneficiaries and others who come into contact with the charity do not, as a result, come to harm.

TLMTI’s wider safeguarding and protection measures are also implemented through additional policies and procedures, including its Policy on health, safety and security, Policy on inclusion with special focus on Leprosy, Policy on protection of Children, Policy on prevention of sexual harassment (POSH) at workplace, Policy on whistle-blowing, Policy on conflict of interest, Policy on Intellectual property rights, etc.

TLMTI recognizes its fundamental duties towards all children and vulnerable adults where its operations necessitate contact with, or have an impact on, them. It is committed to safeguarding children and vulnerable adults from harm and ensuring their rights to protection are realized.

TLM believes that:

a. God loves children and they have the right to a happy, healthy and secure childhood;
b. The welfare of the child/vulnerable adult is paramount;
c. No individual or group should be treated any less favourably than others in being able to access services which meet their particular needs;
d. All children and vulnerable adults without exception have the right to protection from abuse regardless of gender, age, race, disability, sexuality, sexual identity, or beliefs.
e. Working in partnership with children, vulnerable adults, their carers and relevant agencies is essential to promoting welfare; and
f. We must take positive action to promote safe practices and protect children and vulnerable adults from all forms of harm, abuse, neglect, exploitation and radicalisation where reasonably possible.

1.3 Scope
This policy applies to all TLMTI staff, which for the purposes of this policy only includes: trustees, employees (whether working work full-time, part-time and casually), consultants and contractors
(including researchers, students and photographers), interns and volunteers (as the case may be) involved in the work of TLMTI;

TLMTI requires that each of its partners complies with the objectives of this policy by adopting and effectively implementing this policy or replicating/including on substantially the same terms the expectations and responsibilities contained in this policy document (subject to any amendments to take account of any additional requirements imposed by local legal and/or regulatory requirements in the location in which they are operating).

TLMTI also requires that all Members and partners provide the same, or a higher, level of protection for children and vulnerable adults provided for in this policy in accordance with applicable law, regulation and best practice.

Therefore, partners must either have their own Safeguarding Policy or equivalent (which provides the same or a higher level of protection than this policy, in full compliance with local law and best practice) or abide by TLMTI’s Safeguarding Policy for the duration of the partnership agreement/arrangement.

1.4 Policy Aims
This policy is designed to provide guidance to all those to which this policy applies (as outlined above). Its purpose is to help these parties to:

a. Understand the importance of safeguarding issues;

b. Know their responsibilities and ensure compliance under legal and policy obligations

c. within and outside their work environments at all times;

d. Uphold the dignity and respect of children and vulnerable adults;

e. Ensure a safe and trusted environment for children and vulnerable adults is created

f. through preventative measures; and

g. Respond quickly and appropriately to concerns raised.

TLMTI will take all reasonable steps to ensure and encourage:

a. All TLMTI staff, partners and relevant others are aware of, committed to and implement the policies and procedures set out in this document;

b. A culture of openness to enable issues and concerns about safeguarding to be raised and discussed;

c. A sense of accountability between staff/representatives so that actual and potential poor or abusive behaviour can and must be challenged; and

d. That all concerns and/or allegations of abuse or neglect, including breaches of the Safeguarding Code of Conduct, are taken seriously and responded to promptly and appropriately, including that they are reported internally in accordance with the policy and to external authorities, regulators and others as appropriate.

To achieve success, TLMTI will:

a. Adopt, maintain and implement appropriate policies;

b. Have clear lines of accountability for safeguarding throughout the organisation (as set out in this policy);

c. Share this policy and information about child protection, safeguarding and good practice with children, carers and staff;
d. Have effective performance management arrangements and effective management for staff through supervision, support and training;

e. Set clear goals and monitor and review progress;

f. Share information or concerns with agencies who need to know and, where it is appropriate to do so, involving carers and children/vulnerable adults;

g. Undertake regular reviews of its safeguarding processes and practices;

h. Maintain the resources necessary to support this policy; and

i. Provide training to staff at all levels of the organisation in applying safeguarding principles to every aspect of their work.

1.5 **Definitions**

**Child** means any person under the age of 18 years.

**Vulnerable adult** means any person aged 18 or over who is or may be in need of care and support (e.g. health care, relevant personal care or social care) and is experiencing or is at risk of abuse or neglect and, as a result of this, is unable to protect themselves from either the risk or experience of neglect or abuse. (It should be noted that whereas the methods of planning for the protection and safety of vulnerable adults are very similar to that of children, the legislative framework is very different. This particularly applies to such matters as reporting abuse when the adult has a legal status quite different from that of a child.)

**Abuse and neglect** are forms of maltreatment of a child or vulnerable adult. Somebody may abuse or neglect a child or vulnerable adult by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family, in an institutional or in a community setting; by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children. Abuse of children can be physical, sexual, emotional, financial or due to neglect. Abuse of vulnerable adults can vary from treating someone with disrespect in a way which significantly affects the person’s quality of life, to causing actual physical suffering. Abuse can be a single or repeated act or omission, which causes harm or distress. Abuse of vulnerable adults can be physical, financial, discriminatory, due to neglect or omission, psychological, sexual, organisational or as a result of self-neglect, modern slavery, domestic violence.

**Child Protection** is part of safeguarding and promoting welfare and is the activity undertaken to protect specific children who are suffering or likely to suffer significant harm.

**Child Safeguarding** is a term which is broader than ‘child protection’ and relates to the action taken to promote the welfare of children and protect them from harm.

a. protecting children from maltreatment;

b. preventing impairment of children’s health or development;

c. ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and

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

TLMTI notes that the following groups are at enhanced risk of being vulnerable to neglect, abuse and/or exploitation:

a. children under 18 years of age;

b. a person with a physical, sensory, mental, intellectual or emotional impairment, including people affected by leprosy;

c. an older person who is particularly frail;

d. an unpaid carer who may be overburdened, under severe stress or isolated;

e. a homeless person;

f. any person living with someone who abuses drugs or alcohol;

g. women who may be particularly vulnerable as a result of isolating cultural factors; and

h. internally displaced people and refugees.

The presence of one or more of these factors does not necessarily mean that the adult is vulnerable – age, disability or physical illness for example should not lead to the automatic assumption that the individual is vulnerable. A key factor in each case is whether the individual is able to take steps to protect and promote his or her interests.

The presumption is that adults have mental capacity to make informed choices about their safety and how they live their lives. Every time we become involved on a safeguarding issue we need to take into account the ability of adults to make informed choices about the way they want to live and the risks they want to take, to the extent that they have sufficient mental capacity to do so. This includes how able they are:

a. to understand what is likely to result from or affect their situation;

b. to take action themselves to prevent abuse; and

c. to take part as fully as they can in making decisions about getting other parties involved.

1.6 Interaction with children and vulnerable adults

a. All TLMTI staff and other representatives, and those of its partners, should be approachable and respectful to children and vulnerable adults and act in their best interests.

b. Children and vulnerable adults should be encouraged to give their own accounts as much as possible, rather than letting others speak on their behalf.

c. Portrayals of children and vulnerable adults should be accurate and balanced, with emphasis upon their dignity.

d. To the extent that individuals have not been the subject of appropriate background checks as outlined below, they must be supervised at all times by those who have been so checked.

e. No personal information (such as location) which could put a child or adult at risk should be posted on a TLMTI website or published in public-facing literature.
f. Those working for or in connection with TLMTI should always ask permission from children or vulnerable adults (or, in the case of young children, their carer or guardian) before taking images (e.g. photographs, videos) of them, and respect their decision to say no to an image being taken. Images taken of children must be respectful and only used fairly, lawfully and otherwise appropriately in accordance with local information law. If possible the child/guardian/vulnerable adult/carer should sign an informed consent form, which should subsequently be filed securely.

1.7 Staff recruitment

TLMTI recognises that anyone may have the potential to abuse children or vulnerable adults in some way and that all reasonable steps should be taken to ensure unsuitable people are prevented from working with children and vulnerable adults. TLMTI is committed to safe recruitment, selection and vetting, as reflected by the procedures below.

Recruitment and selection practices

In addition to the above checks, TLM will adopt the following recruitment practices:

a. All job descriptions and person specifications should contain specific reference to the responsibilities of the post holder for implementing TLMTI’s Safeguarding Policy and procedures.

b. Advertisements for vacancies should clearly state that a Safeguarding Policy, including screening procedures are in place.

c. Candidates who are selected for interview will be asked to read the Safeguarding Policy in advance of their interview.

d. Particular attention should be paid to gaps in an individual’s employment history and frequent changes of employment and/or address.

e. The successful candidate will be required to provide proof of identity (passport, driver’s licence, identity card) and to sign the Safeguarding Code of Conduct.

f. Where possible, three references will be checked for all prospective employees: from the individual’s current line manager, previous line manager and a character reference. References from family members will not be accepted.

g. All essential qualifications should be verified to the satisfaction of the relevant recruitment manager.

h. Criminal record disclosure checks will be carried out in accordance with this policy.

i. New employees will be required to sign a personal declaration stating any criminal convictions, including those considered ‘spent’, as per the form contained at Appendix 3.

Regulated activities

Regulated activity (i.e. work that a barred person must not do) in relation to children includes, in summary:

a. unsupervised activities: teach, train, instruct, care for or supervise children, or provide advice/guidance on well-being, or drive a vehicle only for children;

b. work for a limited range of establishments (‘specified places’), with opportunity for contact: e.g. schools, children’s homes, childcare premises, but does not include work by supervised volunteers;

c. relevant personal care, e.g. washing or dressing; or health care by or supervised by a health care professional;

d. day to day management or supervision of those carrying out regulated activity (or which would be regulated activity if it was unsupervised).

Work under (a) or (b) is regulated activity only if done overnight or regularly (i.e. once a week or more often, on 3 or more days in a 30-day period or overnight). If the activity in (a) or (b) is to be undertaken infrequently or under supervision, an enhanced criminal record disclosure check can and should still be sought, but without a check of the barred lists.
In relation to vulnerable adults, “regulated activity” includes the following, regardless of frequency:

a. healthcare provided by, or under the direction or supervision of, a health care professional;

b. providing personal care (which includes physical assistance with eating, drinking, washing etc., or prompting and supervising where the person is unable to make a decision without prompting and supervising);

c. relevant social work by a social care worker to an adult;

d. assistance in relation to general household matters to an adult who is in need of it by reason of age, illness or disability;

e. any relevant assistance in the conduct of an adult's own affairs; and

f. the conveying of adults who need to be conveyed by reason of age, illness or disability.

1.8 Raising Safeguarding concerns

TLMTI recognises that it has a duty of care to protect children and vulnerable adults, consistent with the UN Convention on the Rights of the Child (UNCRC) 1989, and the applicable laws in the country.

What TLMTI will do, and expects partners to do:

a. Ensure that a culture of openness exists and is continually cultivated to enable any issues or concerns to be raised by or discussed.

b. Ensure that it takes seriously any concerns raised.

c. Ensure that it listens to and takes seriously the views and wishes of children, vulnerable adults and any other beneficiary.

d. Ensure that it supports children, vulnerable adults, staff or other adults who raise concerns or who are the subject of concerns, including in accordance with its whistleblowing policy.

e. Ensure that it regularly monitors any incidents of identified or suspected harm or abuse that arise through the actions of its staff, partners and/or their operations.

1.9 Awareness and confidentiality

All TLMTI staff and their partners have a responsibility to be aware and alert to the possibility of colleagues or members of the public posing a threat to children and vulnerable adults. However, since not all concerns relate to abuse, it is important to keep an open mind.

An allegation of abuse is a serious issue. In following this policy and local procedures, it is essential that all parties maintain appropriate confidentiality. Sharing of information, which could identify a child, vulnerable adults or an alleged perpetrator, should be purely on a ‘need to know’ basis. Unless abuse has actually been proved to have occurred, one must always refer to ‘alleged abuse’ or other such language as is appropriate.

Please refer to TLMTI’s Data Protection Policy in relation to the management of information and documentation.

1.10 Reporting actual or suspected abuse and responding to a disclosure

This guidance is to be read alongside other relevant TLMTI policies and procedures, including those procedures that relate to whistleblowing and disciplinary processes. In the event of overlap between this policy and any other, this policy shall prevail.

This policy should not be used for complaints or concerns relating to your own personal circumstances, such as the way you have been treated at work and/or by colleagues, or information which relates to suspected wrongdoing, dangers at work or general misconduct that do not relate to children and vulnerable adults. In those cases, you should use the relevant Grievance Procedure, Bullying and Harassment Policy or Whistleblowing Policy as appropriate (and as contained in the in-country HR Handbooks). Do not stay silent because it does not relate directly to children or vulnerable adults. TLMTI
must be made aware (whether via its partners or otherwise) of concerns in relation to the suitability of staff, their conduct and any incidents in which anyone (within or outside of TLMTI/its partners) has been or may be harmed, or which may have reputational implications.

If TLMTI or partner staff have any suspicions or concerns regarding possible abuse or safeguarding matters, or if there is anything with which they feel uncomfortable, they should raise these with their local DSL, Country Leader or Designated Safeguarding Officer. Managers, working together with local DSLs, are accountable for ensuring that procedures are in place for reporting and responding to concerns, including clear links to external sources of support where available.

1.11 Reporting procedure

a. TLMTI’s first priority is always to remove a person from actual, or the threat of, immediate harm. If a child/vulnerable adult is in immediate danger or in need of medical assistance, appropriate action must be taken, e.g. contacting the police and/or an ambulance. The member of staff should not leave the child or vulnerable adult in any situation where abuse might continue. Once this has taken place, reporting in accordance with this policy must be the next step.

b. If a child or vulnerable adult or third party makes an allegation of abuse or discloses information about an incident or incidents which could be construed as abuse you should:

- Find an appropriate and early opportunity to explain that it is likely that the information will be shared with others. Do not promise to keep secrets even if the person says that they will ‘only tell’ if it is a secret. If the person decides not to tell you further information in case you tell others, you must record that s/he wanted to make a disclosure so that the DSL can follow up as necessary;
- Listen calmly and record only what is said. Do not interpret what is said in your own words as this can change the meaning;
- Ask questions only to seek clarification but make sure they are not leading questions. For example: “Tell me exactly what happened?”, “Then what did they do?” rather than “So did they molest you?”
- Do not attempt to ‘interview’ or challenge a child or vulnerable adult as this is a highly sensitive and specialised area and you may inadvertently do more harm than good;
- Explain what will happen next and who will be told;
- Make certain you distinguish between what has actually been said and any inferences you may have made. Accuracy is paramount;
- Do not attempt to investigate the allegations;
- Do not permit your personal doubt to prevent you from making a report to the local DSL or other appropriate person; and
- Do not discuss the matter with any other person and ensure that all records that you have made or have been given are passed to the local DSL and otherwise held securely.

c. Where any staff member or representative has been the recipient of a disclosure or develops concerns or suspicions regarding abuse or exploitation by a fellow staff member, representative or otherwise (whether in the same organisation or not), they must report such concerns to the local DSL. This includes completing the Reporting Form contained at Appendix 4 and sending it by email to the local DSL as soon as practicable and at least within 24 hours.

If the concerns or suspicions relate to the activities of a TLMTI partner, the partner staff member or representative should report to both the TLMTI Country Leader as well as the DSL within that partner organisation.

- The exception to this is where the local DSL has a conflict of interest in relation to the allegation, concern or suspicion. In that instance, the report should be made to the deputy DSL or, if they are also conflicted, directly to TLM Country Leader or, if they are also conflicted, to the Designated Safeguarding Officer.
Under no circumstances (save where a staff member apprehends the commission of harm or abuse and intervenes) should the alleged perpetrator be made aware of suspicions or allegations until such time as the advice of the local DSL and the relevant authorities has been obtained following a report.

The person making the report should otherwise keep the matter strictly confidential and not seek to investigate the incident or suspicion.

Reporting Forms should be signed and dated and as detailed and precise as possible, giving an exact account of what was said. They should report the details as disclosed or alleged, including who was present and what happened, the sequence of events, and so on. All subsequent action should also be documented. Records must be kept securely in a locked place to which access is restricted.

d. Upon receiving a report, the local DSL (or other appropriate person dealing with the report) will confirm receipt of the Reporting Form to the member of staff who submitted it and notify them as to whether an external report has been made. The local DSL will not discuss the incident further with the member of staff, except for clarification.

e. The local DSL will inform the Country Leader, who will in turn inform the local Board Chair.

f. The Country Leader in consultation with the alleged victim, local DSL and local Board Chair must decide at this point whether the alleged incident should be reported to the local authorities in accordance with the local law. The policies of the relevant local safeguarding authorities should be consulted.

g. The local DSL will also decide who should inform the child/vulnerable adult’s family or carer (if appropriate) and when they should be informed, taking advice from relevant authorities and/or the Country Leader as appropriate.

If the member of staff is not satisfied with the action taken by the local DSL, they may make their own report to the Country Leader, the Designated Safeguarding Officer or relevant local body. Support will be made available if the disclosing member of staff is distressed by the incident or the reporting of it.

Disclosures of historical abuse should be treated in the same way as disclosures of current abuse, particularly where there may still be a risk to children and/or vulnerable adults.

All reports must be kept in a secure location (both paper copies and electronic copies).

1.12 Involving local authorities

a. All reasonable advice, guidance and/or requests from the local authority should be carefully followed.

b. If criminal offending is suspected, then escalation to the authorities MUST be a priority. There should also be open lines of communication established with police departments. The local DSL will be responsible for maintaining an appropriate dialogue with the relevant authorities on all safeguarding matters, taking advice from the Country Leader throughout.

c. TLMTI will ensure that it co-operates fully in the provision of information to any relevant local or international agencies and assist any agency investigation to the full extent possible.

d. However, TLM notes that in some situations it may not be in the child or vulnerable adult’s best interests to report to the local authorities (for example, if this could put them at risk of further harassment or harm). In deciding when to report to local authorities, the alleged victim’s best interests will be the overriding consideration.

h. The Country Leader makes the final decision in consultation with the alleged victim, local DSL and local Board Chair.
1.13 **Investigation procedures**

Under no circumstances should TLMTI or any partner or any of its staff undertake an investigation or take any action in relation to the allegations, other than ensuring the safety of the child or vulnerable adult, before the reporting procedure above is completed. Where a report is made to the local authorities, their advice should be sought as to the next steps.

TLMTI and partner staff will fully co-operate with the local authorities and provide all reasonably practicable assistance during the course of any external authority’s investigation. Staff must not do anything that might compromise any authority’s investigation and must ensure that any immediate action required to remove the child/vulnerable adult from harm is taken sensitively to avoid the risk of any evidence being compromised. Every care must be taken to preserve and not taint any evidence that may be required for the investigation of allegations or suspicions and the alleged perpetrator must not be made aware of the suspicion or allegation unless and until TLMTI and/or its partner is advised by the relevant authority that is appropriate for them to do so.

The investigation process set out in this section is subject to any specific advice or guidance that may be given by the relevant local authorities.

a. The staff member or representative should be informed that allegations have been made against them and given an opportunity to respond, in accordance with the disciplinary process contained in the TLMTI Grievance and Disciplinary Policy, or other such governing process where applicable (for example, a partner’s applicable investigation and disciplinary process).

b. Suspension and/or the appropriate disciplinary procedure may be implemented pending any investigation.

c. At the conclusion of the investigation, the staff member or representative should be informed of the results of the investigation and what corrective action, if any, will be taken.

d. All information concerning an alleged incident and investigation is to be documented in writing. All documentation should be kept in a secure location (both paper copies and electronic copies).

1.14 **False or malicious accusations**

If a staff member raises a legitimate concern about suspected abuse or safeguarding concerns which proves to be unfounded on investigation, no action will be taken against the notifying staff member or representative. However, any staff member or representative found to have made false and/or malicious accusations should expect to face disciplinary action. TLMTI or its partner may take legal or other appropriate action in the circumstances.

1.15 **Review of the policy**

TLMTI will regularly review the implementation and relevance of this policy and revise as per the needs of the organisation.
Appendix 1 - Recognizing signs of abuse

It can often be difficult to recognize abuse. It is nevertheless important to know what could indicate that abuse is taking place and to be alert to the need to consult further. Someone can abuse a child/vulnerable adult by actively inflicting harm or by failing to act to prevent harm. Abuse can take place within a family, in an institutional or community setting, by telephone or on the Internet. Abuse can be carried out by someone known to the person or by a complete stranger. If you are worried about a child/vulnerable adult it is important that you keep a written record of any physical or behavioral signs and symptoms. In this way you can monitor whether or not a pattern emerges and provide evidence to any investigation if required.

A. Children

Physical Abuse: Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication. Indicators include:
- Any injuries not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls, bumps, etc
- Injuries which have not received medical attention Reluctance to change for, or participate in, games or swimming
- Finger marks or multiple bruising
- Bruises, bites, cuts, scratches, burns, fractures, etc. which do not have an accidental explanation
- Flinching or evidence of pain/discomfort during normal activity

Emotional Abuse: Emotional abuse is the emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to children that they are worthless, unloved or inadequate or causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. It may feature age or developmentally inappropriate expectations Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone. Indicators include:
- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention seeking behaviour
- Running away/stealing/lying

Sexual Abuse: Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not they are aware what is happening. This may involve physical contact, including penetrative (e.g. rape, buggery) or non-penetrative acts or non-contact activities, such as involving children in looking at, or the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Indicators include:
- Any allegations made by the child concerning sexual abuse
- Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age-inappropriate sexual play
- Sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed sharing arrangements at home
- Unexplained bruising around or bleeding from the genital area
- Stained or bloody underclothing
- Unexplained difficulties in walking

Neglect: Neglect is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. It may involve a parent or carer failing to provide adequate food, shelter or clothing, failure to protect a child from physical harm or danger, or failure to ensure access to appropriate medical care or treatment. Indicators include:
- Persistent hunger
- Weight loss
- Poor hygiene
- Dress inappropriate to weather or activities
- Physical problems and medical needs that are not attended
- **Organized Abuse**: Organised or multiple abuse may be defined as abuse involving one or more abuser and a number of related or non-related abused children and young people. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse. Indicators include:
  - Series of complaints from different parents about the same staff/situations/issues
  - Records regularly being mislaid/poor record keeping
  - Controlling relationships
  - Children/activities being visited regularly by “associates” of staff

**Modern Slavery**: Includes forced labour, debt bondage, sexual exploitation, criminal exploitation and domestic servitude. Indicators include:
  - Absent parent or legal guardian
  - A child is being cared for by an adult that is not their parent or legal guardian.
  - The quality of the relationship between the child and their adult carrier is poor and a reason for concern.
  - May not be attending school or registered with a local doctor
  - A number of unrelated children found at one address.
  - Frequent movement of children from a premises.
  - Children may not always demonstrate outward signs of distress and may have a ‘bond’ with those exploiting them and have been groomed to not disclose their abuse—however, they are likely to be very scared and traumatized.
  - Missing, altered or false documentation is common.

**Spiritual Abuse**: Spiritual abuse is a form of emotional and psychological abuse. It is characterized by a systematic pattern of coercive and controlling behaviour in a religious context. Spiritual abuse can have a deeply damaging impact on those who experience it. However, holding a theological position is not in itself inherently spiritually abusive, but misuse of scripture, applied theology and doctrine is often a component of spiritually abusive behaviour.

**B. Adults**

**Physical Abuse**: Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication. Indicators include:
  - Injuries not consistent with falls or offered explanations
  - Unexplained loss of hair in clumps
  - Cuts that are not likely to be explained by self-injury
  - Finger-marks
  - Flinching or evidence of pain/discomfort during normal activity

**Psychological abuse**: Psychological abuse is any pattern of behaviour by another that results in harm and may include insults, humiliation, ridicule, bullying, threats, enforced isolation, interference in relationships and contact between consenting adults, coercion, lack of privacy or choice, denial of dignity. Indicators include:
  - Signs of strain within a relationship and/or tension when a particular person is present
  - Indicators that an individual acts differently when a third person is present than at other times
  - Suggestions of refusal to allow a choice eg to eat or not eat more or less of particular foods, to dress according to preference
  - Signs of withdrawal or fear or other changes to emotional state
  - Signs of unexplained sleep or weight loss

**Sexual Abuse**: Sexual Abuse is any sexual activity involving but carried out without the informed consent of an adult at risk. Sexual abuse may include sexual intercourse, inappropriate touching, offensive or suggestive language, ‘voyeuristic’ behaviour and exposure to the suggestive or sexually explicit activities of others, including films, photographs, images etc. Indicators include:
  - Unexplained bruising around or bleeding from the genital area;
  - Stained or bloody underclothing
  - Unexplained difficulties in walking
  - Reluctance of the person to be alone with an individual known to them
  - Unusual and inappropriate sexualised language
**Financial or material abuse**: Financial abuse is the misappropriation of funds (savings or income) or property of an adult at risk. This may include exploitation, theft or fraudulent use of money, misuse of property or possessions and incurring financial liabilities on behalf of an adult at risk without their informed consent. Indicators include:

- Unexplained shortage of money despite a seemingly adequate disposable income
- Unexplained withdrawals from savings accounts
- Unexplained disappearance of financial documents for example bank statements, receipts for non-routine expenditure
- Loss of personal possessions

**Neglect and acts of omission**: Neglect may be deliberate or by default where the abuser is not able to provide the care and support needed or may not recognise the need for the care and support to be given. The abuser may also be neglecting themselves. Indicators include:

- Persistent hunger and / or weight loss
- Poor hygiene
- Dress inappropriate to weather or activities
- Denial of religious or cultural needs
- Physical problems and medical needs that are not attended to
- Physical problems and medical needs that are not attended

**Discriminatory abuse**: When the adult at risk is harassed or discriminated against because of their age, race, gender, sexuality, religion, disability, culture etc. Indicators include:

- Signs of strain within a relationship and/ or tension when a particular person is present
- Signs of withdrawal or fear or other changes to emotional state
- Unexplained outbursts
- Out of character discriminatory language, behaviour

**Organisational abuse**: Where neglect and poor professional practice impact on care. It can occur when poor communication, systems, practice and norms mean the care received is below that what should be expected. Indicators include:

- Medication errors
- Poor record keeping
- Complaints from service users and their family
- Loss of personal possessions / clothing
- Controlling relationships between staff and service users

**Self Neglect**: Where the adult at risk is neglecting to care for their own personal hygiene, health or surroundings. Indicators include:

- Hoarding
- Poor personal hygiene
- Unexplained weight loss
- Wearing the same clothes for a number of days
- Physical problems and medical needs that are not attended to

**Modern Slavery**: Includes forced labour, debt bondage, sexual exploitation, criminal exploitation and domestic servitude. Indicators include:

- Not being allowed to travel alone or make decisions
- Lack of personal possessions
- Reluctance to seek help
- Poor levels of nourishment, dress and energy

**Domestic violence**: Includes controlling, coercive or threatening behaviour and / or violence between people who are or have been intimate partners or family members. Indicators include:

- 'Honour' based violence
- Female genital mutilation (FGM)
- Forced marriage
- Signs of strain within a relationship and/ or tension when a particular person is present
- Signs of withdrawal or fear or other changes to emotional state
**Spiritual Abuse:** Spiritual abuse is a form of emotional and psychological abuse. It is characterised by a systematic pattern of coercive and controlling behaviour in a religious context. Spiritual abuse can have a deeply damaging impact on those who experience it. However, holding a theological position is not in itself inherently spiritually abusive, but misuse of scripture, applied theology and doctrine is often a component of spiritually abusive behaviour.

This is not an exhaustive list of abuse and its indicators. There could be other forms of abuse we have not discussed in this policy. We ask all our partners to familiarise themselves with this policy and to train their staff who have contact with children and vulnerable adults in child protection and safeguarding, and on the signs of recognising abuse.
Appendix 2 – Safeguarding Code of Conduct

I, ______________________________ [insert name], acknowledge that I have read and understand The Leprosy Mission’s Safeguarding Policy and that I agree to abide by the following Safeguarding Code of Conduct in the course of my association with The Leprosy Mission Trust India.

The Leprosy Mission Trust India seeks to provide a safe and trusted environment which safeguards anyone who the organisation has contact with, including beneficiaries, staff and volunteers. It expects all of its staff, volunteers, partners and other representatives to contribute to that environment and to demonstrate the highest levels of conduct both at work and outside of work.

I agree that I will:

- maintain professionalism and afford appropriate dignity to others in my conversations and conduct at all times in the course of my association with The Leprosy Mission Trust India or its partners
- comply with all relevant TLM TI policies, including the Safeguarding Policy, Bullying and Harassment Policy and other relevant HR policies (or their equivalents as they apply to the setting that I work in)
- treat all people, and particularly children and vulnerable adults, with respect regardless of race, colour, gender, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.
- wherever possible, ensure that another adult is present when working in the proximity of children and vulnerable adults
- immediately report concerns or allegations of abuse, harm, neglect, exploitation and/or policy non-compliance in relation to a child or vulnerable adult in accordance with the TLM TI Safeguarding Policy and report any other concerns in accordance with other relevant policies (such as the Whistleblowing Policy)
- immediately disclose all allegations, charges, convictions and other outcomes of offences: of a sexual nature; that relate to exploitation or abuse of children/vulnerable adults; or are dishonesty offences such as fraud or bribery
- use any computers, mobile phones, video cameras, cameras or social media appropriately, and never to exploit or harass children/vulnerable adults or other beneficiaries or staff, or access child exploitation material through any medium
- be aware of behaviour and avoid actions or behaviours that could be perceived by others as exploitative or abusive, or otherwise contrary to the Safeguarding Policy.

I agree that I will not:

- intentionally do anything that could reasonably result in harm being caused to TLM TI’s staff, TLM TI’s beneficiaries, children, vulnerable adults or others who come into contact with the charity
- intentionally do anything that could reasonably result in damage to TLM TI’s reputation
- undertake any unsupervised regulated activity (as defined in the Safeguarding Policy) unless and until approved to do so following criminal record disclosure checks
- engage in any behaviour that constitutes bullying or harassment (including sexual harassment) in relation to any person
- exchange money, offers of employment, goods or services for sex or sexual services or personal payments
- use language or behaviour that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate
- engage children under the age of 18 in any form of sexual intercourse or sexual activity whether lawful, paid, nominally consensual, virtual or voyeuristic or otherwise
- invite unaccompanied children or vulnerable adults into private residences, unless they are at immediate risk of injury or in physical danger
- sleep close to unsupervised children unless absolutely necessary in crisis or emergency situations, in which case I must obtain my supervisor’s permission, and ensure that another adult is present if possible (noting that this does not apply to my own children)
- use physical punishment on children or vulnerable adults (and I will only use physical intervention of any sort in accordance with local law and best practice)
- hire children for domestic or other labour which is inappropriate given their age or developmental stage, which interferes with their time available for education and recreational activities, or which places them at significant risk of injury
- develop any ‘special’ relationships with children that could be seen as favouritism (for example, the offering of gifts or special treatment for specific children)
When photographing or filming a child or using children’s images for work-related purposes, I must:

- comply with TLM’s Data Protection Policy
- take care to ensure local traditions or restrictions for reproducing personal images are adhered to before photographing or filming a child or vulnerable adult
- obtain informed consent from the child/vulnerable adult and/or their parent, guardian or carer before photographing or filming a child or vulnerable adult. As part of this I must explain how the photograph or film will be used
- ensure photographs, films, videos and DVDs present children and vulnerable adults in a dignified and respectful manner and not in a vulnerable or submissive manner
- children and vulnerable adults should be adequately clothed and not in poses that could be seen as sexually suggestive
- ensure images are honest representations of the context and the facts
- ensure file labels, meta data or text descriptions do not reveal identifying information about a child/vulnerable adult when sending images electronically or publishing images in any form
- store images securely

I understand that the onus is on me, as a person associated with The Leprosy Mission Trust India, to use common sense and avoid actions or behaviours that could be construed as contrary to applicable law, this Safeguarding Code of Conduct and/or relevant TLMTI policies.

Signed: ________________________________________

Date: _________________________________________
Appendix 3 – Criminal offence disclosure form

Name ___________________________________ Date of Birth ______________________

UIDAI number __________________________ Place of issue __________________ Expiry Date ____________

Disclosure of Criminal Offense Record
List all arrests, convictions, and serious motor vehicle offenses (other than minor traffic violations) incurred as an adult, regardless of how long ago. *If you have no offenses to report, please indicate by putting N/A on first line.*

**Important**

a. This form is required of all applicants to TLMTI. Disclosure must be made if requested by TLMTI post-interview. Any change that occurs if employed, must be disclosed as soon as possible to the HRD.

b. Disclose all history of legal accusation, charges, arrests, or convicted of criminal offences relating to serious motor vehicle or traffic offenses, substance abuse offences, violence or sexually related offences, child exploitation and abuse, felonies and misdemeanors.

c. Criminal offenses are evaluated by TLMTI on an individual basis, with consideration given to the nature and circumstances of the offense. The existence of a criminal offense record is not necessarily cause for disqualification of an application or dismissal from the organisation.

d. If you fail to list any part of your criminal offense history, including omission and intentional falsification, your application to TLMTI may be disqualified and you may lose your opportunity for employment.

<table>
<thead>
<tr>
<th>Date of Criminal Offense</th>
<th>Criminal Offense</th>
<th>Location (City, State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimate date if not known</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
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<tr>
<td>2.</td>
<td></td>
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<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature and Release

I certify that this information on my criminal offense disclosure form and criminal record (attached) is correct and complete.

I understand that providing false or incomplete information, or withholding information by omission or intention, may be cause for disqualification of employment application to TLMTI and loss of opportunity for employment.

I understand that TLMTI may contact referees, supervisors, and other individuals to clarify information supplied in the my application.

I understand that in unusual circumstances, TLMTI may see it necessary to share the findings of the background check with TLMTI senior management.

Date: _____________________________ Signed: _____________________________
Appendix 4: Reporting Form for Safeguarding Concerns or Disclosures

This form must be completed as soon as possible after receiving information that causes concern or suspicion or comprises an allegation of the abuse of a child or vulnerable adult (and in any event within 24 hours). This must be discussed with a designated safeguarding lead as soon as possible. Do not cause delay by attempting to obtain information to complete all of the details.

Note: Confidentiality must be maintained at all times. Information must only be shared on a need to know basis i.e. only if it will protect the child vulnerable adult. Do not discuss this incident with anyone other than those who need to know. Ensure that this form is kept securely and confidentially if in hard copy format or is password protected if stored electronically.

Continue on a separate sheet of paper if required and attach securely to this form.

Part 1: About You

Name: ..........................................................................................................................................................

Your role: .......................................................................................................................................................  

Details of any other organisation involved: ........................................................................................................

Your relationship to the child or vulnerable adult concerned: ........................................................................

Part 2: About the Child/Vulnerable Adult(s)

Name(s): ..........................................................................................................................................................

Sex: ............................................................................................................ Age: ..........................................................

Address: ...........................................................................................................................................................

Who does the person live with? ........................................................................................................................

Part 3: About Your Concern

How did you come to have a concern: was abuse observed or suspected? ....................................................

Was an allegation made? Did a child or vulnerable adult disclose abuse? ....................................................

Date, time and place of any incident(s): ..............................................................................................................  

Nature of concern/allegation: ...............................................................................................................................  

Observations made by you (e.g., person’s emotional state, any physical evidence, injuries): .................................

Write down exactly what the person said, and what you said: ..................................................................................

Any other relevant information? (e.g., disability, language): ................................................................................

Were other children or vulnerable adults involved or aware (or said to be involved or aware)? ........................

Are you aware of any future immediate risk of harm to the child or vulnerable adult? ....................................

Have you reported this to parents or caregivers or any other personnel or agencies? ........................................

Time and date of reporting: ..................................................................................................................................
Person(s) to whom report was made: ...........................................................................................................

Advice given/action taken: ................................................................................................................................

Name of person making report: ...........................................................................................................................

Date: ................................................ Signature: .................................................................................................

Receiver of report

Name: .........................................................................................................................................................

Position and organisation: ................................................................................................................................

Signature: .........................................................................................................................................................

Action taken (including details of reports made to TLM and/or external authorities and advice received):