ST BARTHOLOMEW'S HOSPITAL CHARITABLE FUND

SAFEGUARDING POLICY

Policy Purpose

The purpose of this safeguarding policy is to outline the commitment of St Bartholomew's Hospital Charitable Fund (The Fund) to safeguarding and protecting individuals from abuse; the responsibilities and legal obligations of its Trustees; and the steps to be taken when safeguarding concerns are raised.

Safeguarding Principles

We believe that:

- The safety of individuals is essential. All vulnerable people, regardless of age, disability, gender, racial heritage, religious belief, or personal circumstances, have a right to equal protection from all types of harm or abuse.
- Nobody who is involved in our work should ever experience abuse, harm, neglect or exploitation.
- We all have a responsibility to promote the welfare of our beneficiaries, staff and Trustees, to keep them safe and to work in a way that protects them.
- We all have a collective responsibility for creating a culture in which our people not only feel safe, but also able to speak up if they have any concerns.

Safeguarding Policy Applicability

This safeguarding policy applies to our beneficiaries and to anyone working on our behalf, including our employees and Trustees.

Partner organisations should have their own safeguarding procedures that meet the standards outlined below and include any additional legal or regulatory requirements specific to their work. These may include, but are not limited to:

- Other UK regulators, if applicable, such as CQC.
- Other authorities, such as the NHS.

Our beneficiaries include the patients and staff of St Bartholomew's Hospital and students at Queen Mary University of London Faculty of Medicine and Dentistry. Individual beneficiaries may be classified as at risk, defined as anyone who may be vulnerable due to age, illness, disability, gender, race, religion, or personal circumstances.

The Fund generally operates through intermediaries, and the Trustees and employees do not routinely engage in face-to-face activities with beneficiaries. However, The Fund remains committed to safeguarding any vulnerable individuals with whom anyone connected with The Fund comes into contact via its activities.

The Fund will take all reasonable care to protect its supporters and donors. The Fund will never exploit vulnerability and will do everything it can to ensure that potential donors are able to make an informed decision about the support they choose to give.

Safeguarding should be appropriately reflected in other relevant policies and procedures.

Types of Abuse

Abuse can take many forms, such as physical, psychological or emotional, financial, sexual or institutional abuse, including neglect and exploitation. Signs that may indicate the different types of abuse are at Appendix 1.

Reporting Safeguarding Concerns

If a crime is in progress, or an individual in immediate danger, call the police, as you would in any other circumstances.

If you are a beneficiary, or member of the public, make your concerns known to a member of our team.

The trustees are mindful of their reporting obligations to the Charity Commission in respect of Serious Incident Reporting and, if applicable, to other regulators. They are aware of the Government guidance on handling safeguarding allegations.

Charity Trustee Safeguarding Responsibilities

Responsibilities should be made clear and individuals provided with any necessary training and resources to enable them to carry out their role.

Trustees. This safeguarding policy will be reviewed and approved by the Board annually.

Trustees are aware of and will comply with the Charity Commission guidance on safeguarding and protecting people and also the 10 actions trustee boards need to take to ensure good safeguarding governance.

The Board of Trustees recognises that it has overall responsibility for safeguarding policy and management, even when some aspects of work are delegated to the Executive Secretary. The Board recognises that it is responsible for safeguarding

and promoting the well-being and welfare of The Fund's beneficiaries, its staff and others who come into contact with The Fund, and sees this to be a key governance priority.

Given the low level of contact between the Fund and its potential beneficiaries, it is not currently considered necessary for the Board to appoint a lead trustee with specific responsibility for the oversight of all aspects of safety. That position will be kept under review. Trustees collectively retain responsibility for all safety matters.

Everyone. To be aware of our procedures, undertake any necessary training, be aware of the risks and signs of potential abuse and, if you have concerns, to report those immediately (see above).

Working With Other Organisations

In working with other organisations, including any grant making, we will comply with Charity Commission guidance by carrying out relevant due diligence and, where appropriate, having a written agreement that sets out:

- Our relationship.
- The role of each organisation.
- Monitoring and reporting arrangements.

Safeguarding And Fundraising

Whilst The Fund's fundraising activities are currently limited, should that change, we will ensure that:

- We comply with the Code of Fundraising Practice
- Staff and Trustees are made aware of the Institute of Fundraising guidance on keeping fundraising safe and the NCVO Guidance on vulnerable people and fundraising.
- Our fundraising material is accessible, clear and ethical, including not placing any undue pressure on individuals to donate.
- We do not either solicit nor accept donations from anyone whom we know or think may not be competent to make their own decisions.
- We are sensitive to any particular need that a donor may have.

Online Safeguarding Procedures

We will identify and manage online risks by ensuring:

- Staff and Trustees understand how to keep themselves safe online. We may use high privacy settings and password access to meetings to support this
- The online services we provide are suitable for our users.
- The services we use and/or provide are safe and in line with our code of conduct.
- We protect people's personal data and follow GDPR legislation.
- We have permission to display any images on our website or social media accounts, including consent from an individual.
- We clearly explain how users can report online concerns. If you are unsure, you can contact one of these organisations, who will help you.

Approval and Review

The Board will regularly review this policy and the procedures outlined herein.

St Bartholomew's Hospital Charitable Fund

Appendix 1 - Signs of Abuse

Physical Abuse.

- bruises, black eyes, welts, lacerations, and rope marks.
- broken bones.
- open wounds, cuts, punctures, untreated injuries in various stages of healing.
- broken eyeglasses/frames, or any physical signs of being punished or restrained.
- laboratory findings of either an overdose or under dose medications.
- individual's report being hit, slapped, kicked, or mistreated.
- vulnerable adult's sudden change in behaviour.
- the caregiver's refusal to allow visitors to see a vulnerable adult alone.

Sexual Abuse.

- bruises around the breasts or genital area.
- unexplained venereal disease or genital infections.
- unexplained vaginal or anal bleeding.
- torn, stained, or bloody underclothing.
- an individual's report of being sexually assaulted or raped.

Mental Mistreatment/Emotional Abuse.

- being emotionally upset or agitated.
- being extremely withdrawn and non-communicative or non-responsive.
- nervousness around certain people.
- an individual's report of being verbally or mentally mistreated.

Neglect.

- dehydration, malnutrition, untreated bed sores and poor personal hygiene.
- unattended or untreated health problems.

- hazardous or unsafe living condition (e.g., improper wiring, no heat or running water).
- unsanitary and unclean living conditions (e.g., dirt, fleas, lice on person, soiled bedding, faecal/urine smell, inadequate clothing).
- an individual's report of being mistreated.

Self-Neglect.

- dehydration, malnutrition, untreated or improperly attended medical conditions, and poor personal hygiene.
- hazardous or unsafe living conditions.
- unsanitary or unclean living quarters (e.g., animal/insect infestation, no functioning toilet, faecal or urine smell).
- inappropriate and/or inadequate clothing, lack of the necessary medical aids.
- grossly inadequate housing or homelessness.
- inadequate medical care, not taking prescribed medications properly.

Exploitation.

- sudden changes in bank account or banking practice, including an unexplained withdrawal of large sums of money.
- adding additional names on bank signature cards.
- unauthorized withdrawal of funds using an ATM card.
- abrupt changes in a will or other financial documents.
- unexplained disappearance of funds or valuable possessions.
- bills unpaid despite the money being available to pay them.
- forging a signature on financial transactions or for the titles of possessions.
- sudden appearance of previously uninvolved relatives claiming rights to a vulnerable adult's possessions.
- unexplained sudden transfer of assets to a family member or someone outside the family.
- providing services that are not necessary.
- individual's report of exploitation.