



## Exmoor Rural Health Hub Safeguarding Vulnerable Beneficiaries Policy Version 1.3

### Introduction

The Exmoor Rural Health Hub (ERHH) is a charity set up to provide the advancement of the mental and physical health and wellbeing for the public benefit of the farming and wider rural community of Greater Exmoor. ERHH provides the facilities and organises funding, whilst the day-to-day service is provided by NHS staff using the ERHH facility at Wheddon Cross. Beneficiaries include the farming and wider rural community of Greater Exmoor, and may include children, and adults and/or young people with a physical or mental impairment.

This policy is designed to cover:

- People who work or volunteer for us
- People who receive the NHS services
- People who provide the NHS services
- People donating to us

### Scope

This policy applies to all ERHH employees, volunteers, contracted workers, trustees, donors and any other ERHH representative. It should be considered in conjunction with our Complaints Policy, Health and Safety Policy and Data Protection Policy.

### Statement

The Exmoor Rural Health Hub (ERHH) believes that everyone regardless of age, disability, gender, race, ethnicity, sexual orientation or identity, religion, pregnancy/maternity, or marriage or civil partnership, should never experience abuse of any kind and have a right to equal protection from all types of harm or abuse.

We will take action if we know, or suspect, that any vulnerable person is at risk of harm.

This policy outlines the responsibilities of ERHH in relation to the protection of the vulnerable beneficiaries it supports. The charity undertakes to:

- Treat all people including children, young people and those with a physical or mental impairment with care, respect and dignity
- Listen to and help them (directly, or through their parents, carers or advocates) with anything related to the Exmoor Rural Health Hub services
- Ensure that we avoid unsupervised contact with the vulnerable beneficiaries that we support
- Assess and seek to minimise the risks to vulnerable beneficiaries who take part in activities funded and/or run by The Exmoor Rural Health Hub.

### Legal Framework

This policy has taken into account the responsibilities outlined by the [UK Charity Commission](#) as well as frameworks provided by the [Association of Charitable Foundations \(ACF\)](#) and [Somerset safeguarding policies](#) and procedures.

### Definitions

**Children** – The Exmoor Rural Health Hub adopts the definition used in the [Children Act 2004](#) which defines safeguarding and protecting the welfare of children as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development

- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

The above statutory guidance defines child protection as part of safeguarding and promoting welfare. Child protection is the activity undertaken to protect specific children and young people who are suffering, or are likely to suffer, significant harm.

**Disability** – The Exmoor Rural Health Hub adopts the definition of Disability under the [Equality Act 2010](#) – You are disabled under the Equality Act 2010 if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities.

**Vulnerable beneficiaries** – For the purpose of this Policy, any reference to ‘Vulnerable beneficiaries’ relates to:

- Any child and young people under the age of 18 (including unborn babies)
- Any adult who is unable to safeguard themselves, their property, and their rights. These individuals may be vulnerable to abuse due to their life circumstances or because of their age, health, physical or mental abilities.

## Definitions of Abuse

The Safeguarding Officer will be aware of the wide range of activities and signs involved under the following headings and symptoms individuals might display:

- **Physical abuse** – includes a wide range of abuse from hitting to deprivation of liberty.
- **Psychological/Emotional abuse** – includes range of abuse such as threats, ignoring, humiliation, coercion, leaving a person feeling worthless to denial of human rights.
- **Sexual abuse** includes sexual harassment, abuse and exploitation, female genital mutilation, forced marriage.
- **Neglect** is the ongoing failure to meet a child's basic needs and is the most common form of child abuse. Consist of physical, educational, emotional and medical neglect.
- **Criminal exploitation** – includes drug running, human trafficking and modern slavery.
- **Bullying or harassment** – including cyber abuse.
- **Extremism and radicalisation.**
- **Financial and material abuse** may involve the unauthorized taking (theft) or misuse of any money, income assets, personal belongings or property or any resources of an individual without their informed consent. This also includes the withholding of money or the unauthorised or improper use of a person’s money or property, usually to the disadvantage of the person to whom it belongs. Staff borrowing money or objects from a service user is also considered financial abuse

## Responsibility

The ERHH Trustees are responsible for ensuring that the Safeguarding Vulnerable Beneficiaries Policy and procedures are adhered to.

To support the implementation of this policy, ERHH have appointed a Safeguarding Officer from the Trustees who will be responsible for ensuring this policy is implemented.

Safeguarding and promoting the welfare of vulnerable beneficiaries is everyone’s responsibility. Everyone who works with or on behalf of The Exmoor Rural Health Hub, in either a paid or voluntary capacity, has a role to play and should ensure that their approach considers at all times what is in the best interests of the vulnerable beneficiary.

## The Designated Safeguarding Officer – Contact details

**Name:** Iona Leckie  
**Telephone number:** 01643 841611  
**Email:** [iona.leckie@shearwell.co.uk](mailto:iona.leckie@shearwell.co.uk)

## Implementation of this Policy

ERHH representatives are most likely to be in direct contact with vulnerable beneficiaries via telephone, email or in-person in the following circumstances:

- Individuals who use the service of the NHS staff
- Individuals contacting us regarding funding
- ERHH or third party organised events and meetings.

In implementing this policy, The Exmoor Rural Health Hub will:

- Communicate to all those who work with or on behalf of The Exmoor Rural Health Hub, in either a paid or voluntary capacity, about their legal and moral responsibility to protect vulnerable beneficiaries from harm, abuse and exploitation
- Ensure that all those who work with or on behalf of The Exmoor Rural Health Hub, in either a paid or voluntary capacity, understand their duty to report concerns that arise about a vulnerable beneficiary, or an individual's conduct towards a vulnerable beneficiary, to the Trustees
- Ensure that ERHH Trustees understand their responsibility to refer any safeguarding concerns to the relevant statutory agencies – e.g. [the child protection agencies](#), [social services](#) and / or [police](#)
- Ensure that any procedures relating to the conduct of individuals who work with or on behalf of The Exmoor Rural Health Hub, in either a paid or voluntary capacity, are implemented in a consistent and equitable manner
- Facilitate opportunities for vulnerable beneficiaries to express their ideas and views on a wide range of issues in connection with the service they are provided with and to have access to The Exmoor Rural Health Hub's Complaints Procedure
- Facilitate involvement of parents or carers in the work of The Exmoor Rural Health Hub and to make the safeguarding policy procedures available to them.
- Designate an appropriately trained and informed individual to be the ERHH Safeguarding Officer
- Ensure that safeguarding procedures are understood, maintained and followed by ERHH representatives
- Ensure we practice safe recruitment, including risk assessments, in checking the suitability of appropriate staff and volunteers, including the completion of Disclosure and Barring Service (DBS) check for anyone who may come into direct contact with children or vulnerable adults as part of their work with ERHH
- Ensure anyone else that may come into regular contact with vulnerable beneficiaries as a result of their relationship with ERHH is subject to a risk assessment and undertakes a DBS check
- Store and process personal and sensitive information according to GDPR and Data Protection guidelines
- Review of this policy at least once a year, taking into account changes in legislation, best practice guidance and other factors that may arise
- Make this Safeguarding Policy available to the public through the ERHH website and upon request.

### **The Safeguarding Officer will:**

- Promote safeguarding and provide guidance and advice to staff, trustees and volunteers where needed
- Be available for consultation with staff, trustees or volunteers raising safeguarding concerns
- Maintain a register of statutory and non-statutory safeguarding contacts
- Contact and liaise with other agencies involved in safeguarding children and vulnerable adults as appropriate
- Advise the Chairman and Trustees about what actions need to be taken by ERHH and ensure safeguarding alerts are raised as appropriate
- Ensure that confidential, detailed and accurate records of all safeguarding concerns/allegations are maintained and securely stored
- Ensure that the organisation is compliant with local and national Safeguarding Policy
- Review the ERHH Safeguarding policy and procedures, no less than once a year, in order to implement any necessary changes in accordance with legislation changes, organisational changes, updated DBS guidance
- The Safeguarding Officer will be provided with training and support to fulfil these duties.

### **Exmoor Rural Health Hub Services**

All Health practitioners involved in delivering the Exmoor Rural Health Hub services must have a valid, up-to-date enhanced DBS certificate (issued within the last three years) and their own Professional Liability Insurance in place to cover the sessions that they provide as part of their engagement with The Exmoor Rural Health Hub.

### **Discussing, recording and reporting concerns**

- Any concerns should be discussed with one of the Trustees. The records will be stored securely in compliance with relevant legislation and The Exmoor Rural Health Hub's Privacy Policy. If a vulnerable person is considered to be at immediate risk of harm, the emergency services should be called straight away.
- The Exmoor Rural Health Hub recognises its duty to follow up and report all concerns or allegations made against any of its practitioners, professionals, volunteers or trustees, and all such concerns or allegations of abuse will be treated seriously. If an allegation is made, the Trustees should be informed, and a disciplinary investigation will be carried out. There may also be criminal (police) investigations. If necessary, the appropriate authorities will be contacted and if there is any concern for the immediate safety of a vulnerable beneficiary then the police/social services will be contacted.
- Anyone can raise the alert, if necessary, with the appropriate local service
- The national helplines are 999 if the vulnerable person is at immediate risk or the police on 101 if you think a crime has been committed
- [NSPCC: 0800 800 5000](https://www.nspcc.org.uk/08008005000) hotline.

### **Safeguarding procedures for meetings, interviews or events**

ERHH representatives, and persons accompanying them, may come into contact with children or vulnerable adults in a several ways, for example meetings or at ERHH events. We will carry out appropriate risk assessments before undertaking visits or events that may be attended by children or vulnerable adults.

As a minimum, a parent/guardian or other designated adult must always accompany anyone under the age of 18 where they are invited to meet with ERHH representatives. Similarly vulnerable adults should be invited to have a designated trusted adult with them.

## **Safeguarding procedures for Health check appointments**

NHS staff, and persons accompanying them, may come into contact with children or vulnerable adults during the health check appointments. ERHH will ensure that all NHS staff have the appropriate training to work with vulnerable beneficiaries.

As a minimum, a parent/guardian or other designated adult must always accompany anyone under the age of 18 when they attend a health check. Similarly vulnerable adults should be invited to have a designated trusted adult with them.

## **Safeguarding procedures for donors**

At times we may find ourselves being approached by donors who may be vulnerable or need additional support to decide about a donation.

We recognise that a one size fits all approach is not likely to be successful, so we commit in these instances, to recognising individuals' situations and responding to their needs. We do this in line with the guidelines of the Fundraising Regulator's [Code of Fundraising Practice](#).

We recognise that vulnerability can come from a number of reasons including, but not limited to, mental ill-health, times of financial change and bereavement. If we believe that someone is not in a position to make a decision, will not accept that donation and commit to not making a request to that person in the future. This will be the decision of the Trustees. If we are unsure about their situation or capacity to make a decision, we will ensure that our donation process includes:

- Making sure that all of our information is clear and accessible – if interactions are verbal, we will follow up with written clarification/information.
- Never pressurising someone into making a donation or expecting them to make a decision on the spot.
- Encouraging donors to seek input from their own professional adviser such as solicitor or financial planner.
- Ensuring that we record our interactions and any concerns that we might have with a donor.

## **Safeguarding procedure for incidents involving an ERHH representative**

If any allegation is made against an ERHH representative, including persons accompanying them, this must be reported to the Chairman at the earliest opportunity who will take such steps as considered necessary to ensure the safety of the individual in question and any other persons who may be at risk.

If the allegation is against either the Chairman, or they are unavailable, then the Safeguarding Officer should be notified and take their roles respectively. Under no circumstances should a staff member, trustee or volunteer carry out their own investigation into an allegation or suspicion of abuse.

Immediate action is rarely necessary or advisable. Calling external agencies without consultation should only ever be undertaken in an emergency where there is significant risk of immediate harm. In all other circumstances the Safeguarding Officer and Chairman will determine how to address the incident.

If someone is in immediate danger the Chairman or Safeguarding Officer should contact the [Police](#) or [Social Services](#) immediately. Suspicions must not be discussed with anyone else. Timely information sharing is key to safeguarding children and vulnerable adults. If practical consent to share information should be asked for but if consent isn't given information can still be shared with relevant professionals if you are preventing a child from significant harm or there is a legal requirement to do so.

A clear and legitimate purpose for sharing information about a child or vulnerable adult should be recorded and stored securely. A clear record of the circumstances and actions taken by ERHH should be kept and retained for an appropriate time

## **Identifying potential or actual harm to vulnerable beneficiaries**

Indicators of abuse can take many varied forms, and the identification of physical signs can be complicated as vulnerable beneficiaries may go to great lengths to hide any such signs.

A vulnerable beneficiary who is being abused or neglected may:

- Have bruises, bleeding, burns, fractures or other re-occurring minor injuries
- Show signs of pain or discomfort
- Keep arms and legs covered even in warm weather
- Look unkempt and uncared for
- Have difficulty in making or sustaining friendships
- Appear fearful
- Frequently arrive late for lessons
- Display a change in behaviour
- Be constantly tired or pre-occupied
- Be wary of physical contact.

Individual indicators will rarely, in isolation, provide conclusive evidence of abuse. However, it is important that practitioners, professionals, and volunteers report any concerns in this regard, however minor or insignificant they may think they are – they do not need ‘absolute proof’ that the vulnerable person is at risk nor is it their responsibility to investigate or decide whether such abuse is taking place.

## **Use of Personal Information**

- We do not permit photographs, other images, video or audio recordings of vulnerable beneficiaries to be taken without the consent of the parents/guardians unless the young person is aged 13 years or older and has the capacity to consent. This consent is valid whilst the child is a beneficiary of The Exmoor Rural Health Hub and for up to two years afterwards.
- All images, video and audio recordings will be stored securely, and identified only through the vulnerable beneficiary’s first name and first letter of their surname (so they cannot be traced). If images, video, or audio recordings are selected to be used in high-profile contexts (such as YouTube videos and television programmes), we always ask further permission of parents/guardians and children. We take all steps to ensure these images are used solely for the purposes they are intended.
- Personal information about the vulnerable beneficiaries gathered by The Exmoor Rural Health Hub is stored securely as detailed in the Privacy Policy. The Exmoor Rural Health Hub does not use any personal information unless we have explicit consent. The Exmoor Rural Health Hub ensures that all contact with vulnerable beneficiaries is via a parent or carer and takes place with their consent.

## **Positive Touch**

- The Exmoor Rural Health Hub promotes positive, appropriate and reassuring touch between adults and visually impaired beneficiaries during Health and Mental Health awareness, advice and help sessions. For some vulnerable beneficiaries, who are very young or who have additional disabilities, touch may be an essential element in their communication with others, and as they are supported to understand the world around them.
- All physical contact between adults and vulnerable beneficiaries should contribute to the beneficiaries’ wellbeing, taking verbal and non-verbal clues about a person’s consent to touch and ensuring interaction is welcome and respectful. Exmoor Rural Health Hub practitioners should work in the presence of other adults when working with vulnerable beneficiaries wherever possible and feel confident in modelling and explaining interaction involving touch.

## Policy review

This policy will be reviewed annually and updated as required.



Signed.....

Name: Richard Webber

Position: Chairman

Date: 16<sup>th</sup> September 2025

## Document Control

Author	Date	Version	Summary of Changes
Hilary O'Keife	30/10/2022	1.0	Initial document
Hilary O'Keife	27/08/2025	1.1	Reviewed and clarified definition of vulnerable beneficiaries
Hilary O'Keife	28/08/2025	1.2	Added detail relating to a Safeguarding Officer
Hilary O'Keife	16/09/2025	1.3	Added Safeguarding Officer contact information

