



The Trauma Response Network (TRN) is a registered charity which provides pro-bono therapy and support to people in Great Britain affected by a mass trauma event. Our service is delivered online.

We aim to co-ordinate access to trauma support for those who have suffered a mass trauma or for those indirectly affected by such events.

Safeguarding Policy

Version Date:	4 th March 2026
Approved by:	TRN Trustees
Review Date:	4 th March 2028

TRN Safeguarding Policy

Purpose

Our charitable activities include working with vulnerable people. The purpose of this policy is to protect them and provide stakeholders and the public with the overarching principles that guide our approach in doing so.

Lead Trustee

A lead trustee will be appointed to provide oversight of safeguarding and to lead on any incident investigation and reporting.

Lead Trustee	Lee Martin
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Applicability

This policy applies to anyone directly involved in any activities on behalf of TRN, including our trustees and members of the TRN network.

Partner organisations and individual therapists will be required to have their own safeguarding procedures that must, as a minimum, meet the standards outlined below, and include any additional legal or regulatory requirements specific to their work. These include, but are not limited to other [UK regulators](#), if applicable.

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

Principles

We believe that:

- 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 all of our beneficiaries, TRN therapists 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.

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 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, follow the therapists' safeguarding procedures, and make your concerns known to our admin team, who will alert the lead trustee.

For TRN therapists, please follow your own safeguarding procedures. In addition, make your concerns known to the lead trustee. If you feel unable to do so, speak to another trustee.

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

Responsibilities

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.

A lead trustee/committee will be given responsibility for the oversight of all aspects of safeguarding. This will include:

- Creating a culture of respect, in which everyone feels safe and able to speak up.
- Providing oversight of any lapses in safeguarding.

- Ensuring that any issues are properly investigated and dealt with quickly, fairly and sensitively, and any reporting to the Police/statutory authorities is carried out.
- Leading the organisation in a way that makes everyone feels safe and able to speak up.
- Ensuring that all relevant checks are carried out in recruiting staff and volunteers.
- Ensuring that all allocations that require DBS clearance and safeguarding training are identified, including the level of DBS and any training required.
- Ensuring that a central register is maintained and subject to regular monitoring to ensure that DBS clearances and training are kept up-to-date (safeguarding training in the last 3 years).
- Listening and engaging, beneficiaries, therapists in the TRN network and trustees and others and involving them as appropriate.
- Responding to any concerns sensitively and acting quickly to address these.
- Ensuring that personal data is stored and managed in a safe way that is compliant with data protection regulations.
- Making therapists in the TRN network, trustees and others aware of:
 - Our safeguarding procedures and their specific safeguarding responsibilities on induction, with regular updates/reminders, as necessary.
 - Signpost to free safeguarding training
 - The signs of potential abuse and how to report these.

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 these immediately (see above).

Fundraising

We will ensure that:

- We comply with the [Code of Fundraising Practice](#), including [fundraising that involves children](#).
- 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 Safety

We will identify and manage online risks by ensuring:

- TRN trustees understand how to keep themselves safe online. We may use high privacy settings and password access to meetings to support this.
- We protect people's personal data and follow data protection legislation in line with GDPR.
- We have permission to display any images on our website or social media accounts, including consent from an individual, parent, etc.
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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 having a written agreement that sets out:

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

Version Control - Approval and Review

Version No	Approved By	Approval Date	Main Changes	Review Period
1.0	Board	Jan 24	Approved	Biannually
2.0	Board	Jan 26	Approved	Biannually

This policy will be reviewed as part of any safeguarding incident investigation, to test that it has been complied with and to see if any improvements might realistically be made to it.

Statutory Guidance

[Gov.UK – The role of other agencies in safeguarding](#)

[CC: Infographic; 10 actions trustees need to take.](#)

[CC: Safeguarding duties of charity trustees](#)

[CC: Safeguarding - policies and procedures](#)

[CC: How to protect vulnerable groups](#)

[CC: Managing online risk.](#)

Useful Links

[NCVO: Online safeguarding resources.](#)

[NSPCC: Writing a safeguarding policy](#)

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.