

**VULNERABLE PERSONS PROTECTION POLICY**

*Whilst working in some Care Centres volunteers may witness unsuitable behaviour towards vulnerable people by care staff. More information and guidance about this can be obtained through your training and induction. It is not our place to criticise this practise and such critical conduct could jeopardise our work. However, we can set an excellent example as to how staff and volunteers should treat vulnerable people. This policy should provide you with a code of conduct for working with vulnerable people.*

**1.1 Introduction**

Everyone who participates in L.I.F.E. Humanitarian Aid work is entitled to do so in an enjoyable and safe environment. The L.I.F.E. organisation has a moral and legal obligation to ensure that, when given responsibility for vulnerable people (young people and people with physical or learning disabilities), volunteers provide them with the highest possible standard of care.

The L.I.F.E. organisation is committed to devising and implementing policies so that everyone accepts their responsibilities to safeguard vulnerable people from harm and abuse. This means to follow procedures to protect vulnerable people and report any concerns about their welfare to appropriate authorities (i.e. Team Leader(s) and/or Project Co-ordinator).

The aim of the policy is to promote good practice, providing vulnerable people with appropriate safety/protection whilst in the care of L.I.F.E. volunteers and to allow volunteers to make informed and confident responses to specific vulnerable people protection issues.

**1.1 Policy Statement**

L.I.F.E. Humanitarian Aid work is committed to the following:

- the welfare of the vulnerable people is paramount

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- all vulnerable people, whatever their age, culture, ability, gender, language, racial origin, religious belief and/or sexual identity should be able to participate in activities in a fun and safe environment
- taking all reasonable steps to protect vulnerable people from harm, discrimination and degrading treatment; and to respect their rights, wishes and feelings
- all suspicions and allegations of poor practice or abuse will be taken seriously and responded to swiftly and appropriately. Such suspicions should be reported to the Team Leader(s) and/or Project Co-ordinator
- all L.I.F.E. volunteers who work with vulnerable people will be recruited with regard to their suitability for that responsibility, and will be provided with guidance and/or training in good practice and vulnerable people protection procedures
- working in partnership with care staff and vulnerable people is essential for the protection of vulnerable people

### **1.2 Monitor and review the policy and procedures**

The implementation of procedures should be regularly monitored and reviewed. The appropriate Project Co-ordinator should regularly report progress, challenges, difficulties, achievements gaps and areas where changes are required to the L.I.F.E. Directors.

The policy will be reviewed annually or whenever there is a major change in the organisation or in relevant legislation.

## **Promoting Good Practice**

### **1.3 Introduction**

To provide vulnerable people with the best possible experience and opportunities in the programme, everyone must operate within an accepted ethical framework such as stated in the Policies and Code of Conduct.

It is not always easy to distinguish poor practice from abuse. It is therefore NOT the responsibility of volunteers or participants to make judgements about whether or not abuse is taking place. It is however their responsibility to identify poor practice and possible abuse and act if they have concerns about the welfare of the vulnerable person, as explained in section 4.

This section will help you identify what is meant by good practice and poor practice.

## 1.4 Good Practice

All personnel should adhere to the following principles and action:

- Always work in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets)
- Make the experience fun and enjoyable: promote fairness, confront and deal with bullying/aggressive behaviour
- Treat all vulnerable people equally and with respect and dignity
- Always put the welfare of the vulnerable person first, unless a volunteer's/other person's safety and well-being is in danger
- Maintain a safe and appropriate distance with members of an activity (e.g. it is not appropriate for volunteers to have an intimate relationship with a vulnerable people or to share a room with them)
- Avoid unnecessary physical contact with vulnerable people. Where any form of manual/physical support is required it should be provided openly and with the consent of the vulnerable person if possible. Physical contact can be appropriate so long as it is neither intrusive nor disturbing and the vulnerable person's verbal/nonverbal consent has been given
- Involve carers wherever possible, e.g. where vulnerable people need to be supervised in changing rooms, encourage carers to take responsibility for their own vulnerable person. If groups have to be supervised in changing rooms always ensure volunteers work in pairs
- Request written consent from the suitable authorities if there is an occasion in which vulnerable people require transport to a venue, or if photographs are allowed to be taken
- Gain written consent from the suitable authorities for any significant travel arrangements e.g. overnight stays
- Ensure that if mixed teams are taken away, they should always be accompanied by a male and female member of staff/senior volunteer personnel
- Ensure that at away events, only suitable personnel enter a vulnerable person's room after receiving permission and for good reason, or invite vulnerable people to their rooms for good reason
- Be an excellent role model, this includes not smoking or drinking alcohol in the company of vulnerable people
- Always give enthusiastic and constructive feedback rather than negative criticism
- Recognising the developmental needs and capacity of the vulnerable person and do not risk sacrificing welfare in a desire for organisational or

personal achievements. This means avoiding excessive training or competition and not pushing them against their will

- Secure written consent for the organisation to act in *loco parentis*, to give permission for the administration of emergency first aid or other medical treatment if the need arises
- Keep a written record of any injury that occurs, along with details of any treatment given

### 1.5 Poor Practice

The following are regarded as poor practice and should be avoided by all L.I.F.E. volunteer personnel:

- unnecessarily spending excessive amounts of time alone with vulnerable people away from others
- taking vulnerable people alone in a car on journeys, however short
- taking vulnerable people to your accommodation where they will be alone with you
- sharing a room with a vulnerable person (unless that person requires constant supervision in which case a senior volunteer/staff member should be present)
- engaging in rough, physical or sexually provocative games
- allow or engage in inappropriate touching of any form
- allowing vulnerable people to use inappropriate language unchallenged
- making sexually suggestive comments to a vulnerable person, even in fun
- reducing a vulnerable person to tears as a form of control
- allow allegations made by a vulnerable person to go unchallenged, unrecorded or not acted upon
- do things of a personal nature that the vulnerable person can do for themselves

When a case arises where it is impractical/impossible to avoid a certain situation e.g. transporting a vulnerable person in your car, the tasks should only be carried out with the full understanding and consent of the carer and the vulnerable person involved.

If during your care you accidentally hurt a vulnerable person, the vulnerable person seems distressed in any manner, appears to be sexually aroused by your actions and/or if the vulnerable person misunderstands or misinterprets something you have done; report any such incidents as soon as possible to a Team Leader and/or Project Co-ordinator and make a written note of it. Carers should also be informed of the incident if appropriate.

## **Defining Vulnerable Person Abuse**

### **1.6 Introduction**

Vulnerable person abuse is any form of physical, emotional or sexual mistreatment or lack of care that leads to injury or harm. It commonly occurs within a relationship of trust or responsibility and is an abuse of power or a breach of trust. Abuse can happen to a vulnerable person regardless of their age, gender, race or ability.

There are four main types of abuse: **physical abuse, sexual abuse, emotional abuse and neglect**. The abuser may be a family member, someone the vulnerable person encounters in residential care or in the community. Any individual may abuse or neglect a vulnerable person directly, or may be responsible for abuse because they fail to prevent another person harming the vulnerable person.

Abuse in all of its forms can affect a vulnerable person at any age. The effects can be so damaging that if not treated may follow the individual for many years.

Vulnerable people with disabilities may be at increased risk of abuse through various factors such as stereotyping, prejudice, discrimination, isolation and a powerlessness to protect themselves or adequately communicate that abuse had occurred.

### **1.7 Types of Abuse**

- **Physical Abuse:** where someone physically hurts or injures a vulnerable person e.g. hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating, or drowning. Giving vulnerable people alcohol or inappropriate drugs would also constitute vulnerable people abuse.

This category of abuse can also include when a carer reports non-existent symptoms or illness deliberately, and causes ill health in a vulnerable person they are looking after. This is called Munchausen's syndrome by proxy.

In an activity situation, physical abuse may occur when the nature and intensity of training disregards the capacity of the vulnerable person's body.

- **Emotional Abuse:** the persistent emotional ill treatment of a vulnerable person, likely to cause severe and lasting adverse effects on the vulnerable people's emotional development. It may involve telling a vulnerable person they are useless, worthless, unloved, or inadequate; or valued in terms of only meeting the needs of another person. It may feature expectations of vulnerable people that are not appropriate to their age or development. It may cause a vulnerable person to be frightened or in danger by being constantly shouted at, threatened or taunted which may make the vulnerable person frightened or withdrawn.

Ill treatment of vulnerable people, whatever form it takes, will always feature a degree of emotional abuse.

Emotional abuse in an activity may occur when the vulnerable person is constantly criticised, given negative feedback, expected to perform at levels that are above their capability. Other forms of emotional abuse could take the form of name calling and bullying.

- **Bullying** may come from another vulnerable person or carer. Bullying is defined as deliberate hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. There are three main types of bullying.

It may be physical (e.g. hitting, kicking, slapping), verbal (e.g. racist or homophobic remarks, name calling, graffiti, threats, abusive text messages), emotional (e.g. tormenting, ridiculing, humiliating, ignoring, isolating from the group), or sexual (e.g. unwanted physical contact or abusive comments).

- **Neglect** occurs when a carer fails to meet the vulnerable person's basic physical and/or psychological needs, to an extent that is likely to result in serious impairment of the vulnerable people's health or development. For example, failing to provide adequate food, shelter and clothing, failing to protect from physical harm or danger, or failing to ensure access to appropriate medical care or treatment.

Refusal to give love, affection and attention can also be a form of neglect. Volunteers who work in residential care homes in some countries, may see this type of abuse on a large scale and the results are distressing.

- **Sexual Abuse** occurs when people (male and female) use vulnerable people to meet their own sexual needs. This could include full sexual intercourse, masturbation, oral sex, anal intercourse and fondling. Showing vulnerable people pornography or talking to them in a sexually explicit manner are also forms of sexual abuse.

### 1.8 Indicators of Abuse

Even for those experienced in working with vulnerable people abuse, it is not always easy to recognise a situation where abuse may occur or has already taken place. Most people are not experts in such recognition, but indications that vulnerable person is being abused may include one or more of the following:

- unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on a part of the body not normally prone to such injuries
- an injury for which an explanation seems inconsistent
- the vulnerable person describes what appears to be an abusive act involving them
- another vulnerable person or carer/volunteer expresses concern about the welfare of a vulnerable person
- unexplained changes in a vulnerable person's behaviour e.g. becoming very upset, quiet, withdrawn or displaying sudden outbursts of temper
- inappropriate sexual awareness
- engaging in sexually explicit behaviour (although this can also be a result of not understanding new feelings and emotions through puberty due to a lack of education)
- distrust of adults, particularly those whom a close relationship would normally be expected (this is however common in institutionalised people because they rarely experience meaningful relationships in their lives)
- difficulty in making friends (friendships can be unfamiliar for people growing up in institutions)
- being prevented from socialising with others
- displaying variations in eating patterns including over eating or loss of appetite

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- losing weight for no apparent reason
- becoming increasingly dirty or unkempt

Signs of bullying include:

- behavioural changes such as reduced concentration and/or becoming withdrawn, clingy, depressed, tearful, emotionally up and down, reluctance to go training or competitions
- an unexplained drop off in performance
- physical signs such as stomach aches, headaches, difficulty in sleeping, bed wetting, scratching and bruising, damaged clothes, bingeing e.g. on food, alcohol or cigarettes
- a shortage of money or frequents loss of possessions

It must be recognised that the above list is not exhaustive, but also that the presence of one or more of the indications is not proof that abuse is taking place. It is **NOT** the responsibility of those volunteering for L.I.F.E. to decide that vulnerable people abuse is occurring. It **IS** their responsibility to act on any concerns for informing the appropriate Team Leader(s) and/or Project Co-ordinator.

### 1.9 Use of Photographic/Filming Equipment

In many countries it is illegal to take photos/film of people in care. Volunteers should also question how responsible it is to take pictures of people who cannot give consent for their photo to be taken. When working in residential care homes, volunteers should presume photography in any form (including mobile phones) is not allowed unless they are explicitly asked in writing by a Director of the home or Child Protection to take photos. When working in communities, permission should be sought from the relevant authority or parent/carer.

## Responding to Suspicions and Allegations

### 1.10 Introduction

It is not the responsibility of anyone volunteering for L.I.F.E. to decide whether or not vulnerable person abuse is/has taken place. However there is a responsibility to act on any concerns through contact with the appropriate

Team Leader(s) and/or Project Co-ordinator so that they can then make inquiries and take necessary action to protect the vulnerable person. This applies **BOTH** to allegations/suspicious of abuse occurring within L.I.F.E. and to allegations/suspicious that abuse is taking place elsewhere.

This section explains how to respond to allegations/suspicious.

### 1.11 Receiving Evidence of Possible Abuse

We may become aware of possible abuse in various ways. We may see it happening, we may suspect it happening because of signs such as those listed in section 3 of this document, it may be reported to us by someone else or directly by the vulnerable person affected.

In the last of these cases, it is particularly important to respond appropriately. If a vulnerable person says or indicates that they are being abused, you should:

- **stay calm** so as not to frighten the vulnerable person
- **reassure** the vulnerable person that they are not to blame and that it was right to tell
- **listen** to the vulnerable person, showing that you are taking them seriously
- **keep questions to a minimum** so that there is a clear and accurate understanding of what has been said. The law is very strict and vulnerable people abuse cases have been dismissed where it is felt that the vulnerable person has been led or words and ideas have been suggested during questioning. Only ask questions or repeat certain words or phrases to clarify.
- **inform** the vulnerable person that you have to inform other people about what they have told you. Tell the vulnerable person this is to help stop the abuse continuing. Encourage them to tell an authority figure what they have told you if appropriate.
- **safety of the vulnerable person** is paramount. If the vulnerable person needs urgent medical attention call an ambulance, inform the doctors of the concern and ensure they are made aware that this is a vulnerable person protection issue
- **record** all information
- **report** the incident to the relevant supervisor, e.g. Team Leader(s) and/or Project Co-ordinator.

**If there is a language barrier, try to find a native speaker who the vulnerable person can trust quickly and keep them with you. Try to gesture what you are doing so they don't get scared.**

### **1.12 Recording Information**

To ensure that information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern. In recording you should confine yourself to the facts and distinguish what is your personal knowledge and what others have told you. Do not include your own opinions.

Information should include the following when ever possible:

- the vulnerable person's name, age and date of birth
- the vulnerable person's address and telephone number
- whether or not the person making the report is expressing their concern or someone else's
- the nature of the allegation, including dates, times and any other relevant information
- a description of any visible bruising or injury, location, size etc. Also any indirect signs, such as behavioural changes
- details of witnesses to the incidents
- the vulnerable person's account, if it can be given, of what has happened and how any bruising/injuries occurred
- have the carers been contacted? If so what has been said?
- has anyone else been consulted? If so record details
- has anyone been alleged to be the abuser? Record detail

### **1.13 Reporting the Concern**

All suspicions and allegations **MUST** be reported appropriately. It is recognised that strong emotions can be aroused particularly in cases where sexual abuse is suspected or where there is misplaced loyalty to a colleague. It is important to understand these feelings but not allow them to interfere with your judgement about any action to take.

L.I.F.E. expects its volunteers to discuss any concerns they may have about the welfare of a vulnerable person immediately with the person in charge (i.e.

Team Leader(s) and/or Project Co-ordinator) and subsequently to check that appropriate action has been taken.

If the Team Leader(s) and/or Project Co-ordinator is not available you should take responsibility and seek advice from another suitable person such a returning volunteer or Volunteer Co-ordinator who is unlikely to be biased (i.e. not a colleague of the alleged abuser). Concerns should only be voiced to a Team Leader, Volunteer Co-ordinator, Project Co-ordinator, International Volunteer Manager or L.I.F.E. Director. One of these personnel shall then notify the appropriate authorities.

**NB: If there is any doubt, you must report the incident: it may be just one of a series of other incidences which together cause concern**

Allegations of abuse are sometimes made sometime after the event. Where such an allegation is made, you should follow the same procedures and have the matter reported. This is because other vulnerable people may be at risk from the alleged abuser. Anyone who has a previous conviction for offences related to abuse against vulnerable people is automatically excluded from volunteering with vulnerable people.

### **4.5 Confidentiality**

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only.

All information should be stored in a secure place with limited access to designated people, in line with data protection laws.

### **4.6 Internal Inquiries and Suspension if abuse is suspected of a L.I.F.E. volunteer**

- The appropriate L.I.F.E. official will make an immediate decision about whether any individual accused of abuse should be temporarily suspended pending further inquiries
- Irrespective of the findings of the inquiries L.I.F.E. will assess all individual cases to decide whether a volunteer can be reinstated and how this can be sensitively handled. This may be a difficult decision; especially where there is insufficient evidence to uphold any action. In such cases the

L.I.F.E. Directors must reach a decision based upon the available information which could suggest that on the balance of probability, it is more likely than not that the allegation is true. The welfare of the vulnerable person should remain of paramount importance throughout.

## **2 Recruiting and Selecting Personnel with Vulnerable people**

### **2.1 Introduction**

It is important that all reasonable steps are taken to prevent unsuitable people from working with vulnerable people. To ensure unsuitable people are prevented from working with vulnerable people the following steps will be taken when recruiting.

### **2.2 Controlling Access to Vulnerable people**

- All volunteers will complete an application form. The application form will elicit information about the applicants past and a self disclosure about any criminal record.
- Two members of L.I.F.E. will conduct an interview which should last at least 30 minutes.
- Evidence of identity (passport or driving licence with photo) should be brought to the interview.
- Consent should be obtained from the applicant to seek information from the Criminal Records Bureau if a CRB check is not currently held by the applicant.
- Two references, including one regarding previous work with vulnerable people, should be obtained. These references **MUST** be taken up and confirmed through written communication.

### **2.3 Interview and Induction**

All volunteers will be required to undertake an interview carried out to acceptable protocol and recommendations. All volunteers should receive formal and informal induction during which:

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- A check should be made that the application form has been completed in full, including sections on criminal records and self disclosures
- Their qualifications should be substantiated
- The role requirements and responsibilities should be clarified
- They should sign up to the organization's Code of Ethics and Conduct, acknowledge they have read the Policies and Procedures, Risk Assessment, and a Disclaimer.
- Vulnerable People Protection Procedures are explained and training needs identified e.g. basic vulnerable people protection awareness

### 2.4 Training

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help volunteers to:

- Analyse their own practice against what is deemed good practice, and to ensure their practice is likely to protect them from false allegations
- Recognise their responsibilities and report any concerns about suspected poor practice and/or abuse
- Respond to concerns expressed by a vulnerable people
- Work safely and effectively with vulnerable people

L.I.F.E. requires:

- All volunteers who have access to vulnerable people to undergo a CRB check or produce a currently valid check
- All volunteers are to undertake relevant vulnerable people protection training or undertake a form of home study, to ensure their practice is exemplary and to facilitate the development of positive culture towards good practice and vulnerable people protection
- All volunteers are to receive advisory information outlining good/bad practice and informing them what to do if they have concerns about the behaviour of an adult towards a vulnerable person

If you have any questions or concerns about this policy, please discuss them with your Project Co-ordinator or Team Leader well in advance of your trip. You should also remember that this information should be at the back of your mind ready for an emergency, but should not hinder your work.

Volunteers are encouraged to support and care for the people they work with, and shouldn't be worried about hugging a person as long as it is done appropriately as discussed in this document. Further guidance on this matter is available on the training section of the CAST website and through training events.