



SAFEGUARDING POLICY & PROCEDURE

1. Purpose

- 1.1. Blackdown Support Group (BSG) acknowledges that people who use its services should be treated with dignity and respect, receive high quality, compassionate care and be safe from harm and abuse. BSG recognises that some people are less able to protect themselves than others, and some have difficulty making their wishes and feelings known. This may make them more vulnerable.
- 1.2. As an organisation BSG is committed to keeping children and adults safe, and working to make safeguarding central in everything we do.
- 1.3. As a general principle, BSG will endeavour to ensure that people using its services have real choice and control over what happens to them, while acknowledging that people who lack capacity will need someone to represent them in their best interests.

2. Intended outcomes

- 2.1. The primary purpose of this policy and the BSG's safeguarding procedures is to promote well-being of service-users, volunteers and employees, and to prevent abuse and neglect from happening in the first place.
- 2.2. In the case of children and young people (a child is defined as anyone under the age of 18), the following additional objectives apply:
 - Protecting children from maltreatment
 - Preventing impairment of children's health and 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
- 2.3. Where there is evidence that abuse has occurred the BSG will seek to ensure the safety and wellbeing of anyone who has been subject to abuse or neglect.
- 2.4. Where there is evidence that abuse may have occurred as a result of the actions of anyone acting on behalf of BSG, the BSG will take action against those responsible for abuse or neglect having taken place.
- 2.5. Where there is evidence that abuse may have occurred as a result of the activities of the BSG, the BSG will learn lessons and make changes that could prevent similar abuse or neglect from happening to other people (e.g. through learning and development programmes for employees, volunteers or Trustees).

3. Definitions

- 3.1. Vulnerable persons at particular risk of abuse include, but are not limited to, those who:

- are elderly, particularly if physically disabled due to ill health or cognitive impairment
- have a learning disability
- have a physical disability and/or a sensory impairment
- have mental health needs, including dementia or a personality disorder
- have a long-term illness / condition
- misuse substances or alcohol
- are unable to demonstrate the capacity to make a decision
- are in need of care and support
- are under 18

3.2. Additionally, adults who:

- are experiencing, or are at risk of, abuse or neglect
- as a result of their care and support needs are unable to protect themselves against the abuse or neglect or the risk of it.
- have care and support needs but are not currently receiving care or support from a health or care service: they may still be an adult at risk.

3.3. Abuse may comprise a single act or repeated acts. It may result in significant harm to, or exploitation of, the person subjected to it. Abuse can happen to anyone who may be unable to protect themselves against significant harm or exploitation.

3.4. Examples of types of abuse and the signs that abuse has taken place are listed at Appendix 1.

4. Roles and responsibilities

4.1. The Board of Trustees.

4.1.1 Overall responsibility for ensuring safeguarding rests with the Board of Trustees (The Board). The Board will nominate a Lead Safeguarding Trustee to oversee the implementation of Safeguarding Policy and Procedures.

4.2. The Lead Safeguarding Trustee

4.2.1 The Lead Trustee will receive and investigate any safeguarding concerns relating to the Manager of the BSG (the Manager).

4.3. The Manager

4.3.1 The Manager (Designated Safeguarding Lead) will oversee the operational implementation of Safeguarding Procedures.

4.3.2 In the event of a safeguarding concern the Manager will be the person to whom any such concerns should be reported. In their absence these should be reported to the Services Co-ordinator (Deputy Designated Safeguarding Lead) or to the Lead Trustee.

4.3.3 The Manager will investigate any reported safeguarding incidents or concerns and report any findings to the Lead Trustee and the Board.

4.3.4 The Manager will recruit members of staff in accordance with the safer recruitment procedure at Appendix 2. Prospective volunteers will be subject to checks made with the Disclosure and Barring Service (DBS).

4.4 Employees

- 4.4.1 Employees of BSG are well-placed to identify safeguarding issues, both when taking new referrals for service-users previously unknown to the Charity and through their knowledge and understanding of existing regular service-users.
- 4.4.2 Among tools that are likely to assist in identifying safeguarding concerns are Risk Assessment Checklists to be found at Appendix 3.
- 4.4.3 Employees may be the first people to notice signs of possible abuse and it is their duty to report their concerns, in the first instance to the Manager. If concerns relate to the behaviour or activities of the Manager, they should be reported to the Lead Safeguarding Trustee.
- 4.4.4 Employees may receive disclosures of abuse and/or observe individuals who are at risk of abuse, either from professionals or from family members. This policy will enable staff/volunteers to make informed and confident responses to safeguarding issues that arise.
- 4.4.5 In the event of a safeguarding concern being identified, employees will follow the procedure outlined at Appendix 5.

4.5 Volunteers

- 4.5.1 Volunteers have responsibility for their own personal safety and that of service-users to whom they are providing a service on behalf of BSG.
- 4.3.1 Volunteers may be the first to notice signs of possible abuse and it is vital that they feel confident to report their concerns. In the first instance, safeguarding concerns should be reported to the Manager or the Services Co-ordinator. If concerns relate to the behaviour or activities of the Manager or Services Co-ordinator, they should be reported to the Lead Safeguarding Trustee.
- 4.3.2 In the event of a safeguarding concern being identified, volunteers are required to follow the procedure outlined at Appendix 5.

5 Boundaries

- 5.1 Service-users will have the nature and limits of the BSG's services explained to them. If the service-user asks an employee or volunteer to do something that is inconsistent with standard procedures, then the employee or volunteer must advise the service-user that they will have to seek authorisation from the Manager first.

6 Training

- 6.1 All employees receive safeguarding training on induction to an appropriate level for their role. This is updated every 3 years.
- 6.2 All volunteers receive safeguarding training on induction and a refresher every 3 years.
- 6.3 All employees receive a staff handbook on induction.
- 6.4 All volunteers receive a volunteer handbook on engagement.
- 6.5 All employees and volunteers have read, understood and agreed to the code of conduct and made a declaration of fitness for the role prior to commencing work with BSG.

7 Publicity

- a. The latest version of this policy will be displayed on the BSG website.

- b. Any changes in Policy or Procedure will be advised to Employees in regular staff meetings and to Volunteers via a monthly newsletter.

Review Date: January 2026

Approved by Trustees on: 20th January 2026

Signed by Chairperson:



Next Review Date: March 2027

APPENDIX 1 - Types of abuse

- **Physical:** including hitting, shaking, biting, grabbing, withholding food or drink, force-feeding, wrongly administering medicine, unnecessary restraint, failing to provide physical care and aids to living.
- **Sexual:** including sexual assault, rape, inappropriate touching, pressurising someone into sexual acts they don't understand or feel powerless to refuse.
- **Emotional or psychological:** including verbal abuse, shouting, swearing, threatening abandonment or harm, isolating, taking away privacy or other rights, bullying/intimidation, blaming, controlling or humiliation.
- **Financial or material:** including withholding money or possessions, theft of money or property, fraud, intentionally mismanaging finances, borrowing money and not repaying.
- **Neglect:** including withholding food, drink, heating and clothing, failing to provide access to health, social and educational services, ignoring physical care needs, exposing a person to unacceptable risk, or failing to ensure adequate supervision.
- **Discriminatory abuse (also known as Hate Crime):** including slurs, harassment and maltreatment due to a person's ethnicity, disability, age, sex, gender or gender status, religion or belief, culture or sexual orientation.
- **Institutional abuse:** including the use of systems and routines which neglect a person receiving care. This can happen in any formal care setting.
- **Mate crime:** where vulnerable or isolated people can be befriended by people who then exploit them financially, physically or sexually. These groups or individuals pretend to be friends but are really taking advantage of people. This is abuse of a vulnerable person.
- **Self-Neglect:** where the person makes a choice to potentially abuse themselves, e.g. neglecting personal hygiene, self-harming, not eating, drug and alcohol abuse.

Common signs that abuse has occurred / is occurring

Here are just a few examples of possible signs of abuse or vulnerability, none being conclusive on their own:

- Injuries, such as a slap, being restrained in a chair, or given too much medication
- Being involved in a sexual act that was unwanted or not agreed to, like watching pornography
- Weight loss
- Dehydration
- Lack of personal care
- Bills not being paid

- An overly critical or disrespectful carer who may, for example, bully or undermine
- Sudden loss of assets, friends or family or threats to gain access to someone's money, or to get them to change their will
- Not getting to medical appointments
- Deference or submission to a suspected abuser
- Change in behaviour or mood
- Isolation from usual network of friends, family or community
- Where a carer looks after someone in a way that is convenient to them rather than what the person needs, thereby affecting their health
- Forgetting appointments
- Repeating acts such as telephoning repeatedly to book same appointment
- Repeatedly not being there when an appointment has been made
- Repeatedly not answering the door or the phone.

APPENDIX 2 - Safeguarding Reporting Procedure

How can you help?

Each time you are in contact with people ask yourself these questions:

1. Did you have any concerns when travelling with or talking to someone?
2. Are there any changes that the office team should be aware of?
3. Have you had difficulties/problems you would like to discuss with a member of staff?

IF IN ANY DOUBT TELL A MEMBER OF THE OFFICE TEAM

Volunteer safeguarding procedure:

- **If you determine someone is unsafe or at immediate risk of harm, call 999**
- **If you would like to talk to the police but it is not an emergency, call 101**
- Record your concern in writing – **WHO, WHAT, WHEN**

You can submit your concern via this form

<https://forms.office.com/e/aeJUA9ZSSB>

Or via email to

d-icb.bsgadmin@nhs.net

This email address is monitored Monday to Friday 9-11am excluding bank holidays

Please send your concern within 24 hours.

If you are told about possible abuse:

- Listen to what the person has to say.
- Stay calm.
- Do not show shock, disgust or be judgmental or dismissive of the concern.
- Ask sufficient questions to determine if the person concerned is safe but try not to ask leading questions
- Seek consent to share information and explain that you are concerned and will have to pass the information on. **You should still share your concern even if the person has not consented.**
- Record what you have been told using the person's own words and send to the Designated Safeguarding Lead/Deputy Designated Safeguarding Lead
- Maintain strict confidentiality and do not discuss with anyone else at all.
- Take no further action.

Employee safeguarding procedure:

- **If you determine the person is unsafe or at immediate risk of harm, call 999**
- **If you would like to talk to the police but it is not an emergency, call 101**
- Take appropriate notes regarding any concerns raised and keep them safe
- Record all concerns raised on Safeguarding Concern Form <https://forms.office.com/e/aeJUA9ZSSB> and within 24 hours of receipt.
- All concerns raised must be reported to named Safeguarding Trustee(s) Nicki Dowson or Sarah Folland within 48 hours.
- Where possible seek consent from the person deemed to be at risk to share information regarding the concern. Consider:-
 1. Does the person at risk have care and support needs? If so, does this mean they are unable to protect themselves from abuse or neglect?
 2. Have you informed them that you are thinking about reporting a safeguarding concern?
 3. Does the person have the mental capacity to understand the safeguarding concerns, and have they given their valid and informed consent? or
 4. They do not have the mental capacity to consent to this referral, but it is being made in their best interest? or
 5. The person has the mental capacity but has not consented, but there is significant risk to life and limb or wider public interest?
 6. If it is safe to do so, have you talked to the person about what has happened to them? If so, have you asked them what is important to them and what they want to happen?
 7. Are there any other adults or children at risk in the situation?
- Report Safeguarding Alert to relevant local authority and/or GP Practice
- If the potential abuse involves a driver or member of staff, that person will be suspended from all activity whilst an investigation is undertaken.

Local Authority Safeguarding contacts:

Devon:

Anyone can use the following contact details to report safeguarding concerns

Adults at risk [0345 1551 007](tel:03451551007) (Monday to Thursday 9.00 am to 5.00 pm, Friday 9.00 am to 4.30 pm)

Outside of the hours above or on bank holidays call the Emergency Duty Service on [0345 6000 388](tel:03456000388).

Alternatively, you can email: adultsc.safeguardingadultservices-mailbox@devon.gov.uk (Devon Safeguarding Adults Service).

Professionals can use the following contact details

You can report your concerns by;

- calling Adult Social Care on [0345 1551 007](tel:03451551007) (Mon to Thurs 9am – 5pm, Friday 9am – 4:30pm)
- Outside of the hours above or on bank holidays call the Emergency Duty Service on [0345 6000 388](tel:03456000388).

Alternatively, you can [download a Word version of the report a safeguarding concern form](#) and email it to adultsc.safeguardingadultservices-mailbox@devon.gov.uk (Devon Safeguarding Adults Service).

Domestic violence

Sexual violence and domestic violence and abuse can happen to anyone of any gender, sexuality, ethnicity or age.

The impacts of living with violence and abuse can be devastating and its effects are far-reaching, impacting on individuals, families and communities. You can visit the [Safer Devon website](#) to find more information.

If you or someone you know is affected by domestic violence there is help available. For independent and confidential advice call Devon's domestic abuse helpline on [0345 155 1074](tel:03451551074) or visit our [Domestic and Sexual Violence and Abuse website](#).

Children at risk in Devon

If you are concerned about the safety of a child in Devon or want to speak to someone, or if you are a child worried about your own safety, you can contact our Multi-Agency Safeguarding Hub (MASH) by:

- completing an online [request for support form](#)
- calling us on [0345 155 1071](tel:03451551071)
- emailing mashsecure@devon.gov.uk and giving as much information as you can

If a child is at immediate risk contact the police on [999](tel:999).

Somerset:

If you are worried about a child, a young person under the age of 18, or a vulnerable adult living in Somerset you should contact Somerset Council on **0300 123 2224**.

Children in Somerset

<https://www.somerset.gov.uk/children-families-and-education/report-a-child-at-risk/>

Adults in Somerset

<https://www.somerset.gov.uk/care-and-support-for-adults/report-an-adult-at-risk/>

APPENDIX 3 - Safer Recruitment Procedure

- All employees and volunteers have a face to face interview prior to engagement.
- All employees and volunteers are asked to complete an application form prior to interview.
- All volunteers conducting transport or home visiting services complete an enhanced DBS check for Adults – this is rechecked every 3 years.
- All employees who have in person contact with vulnerable adults complete an enhanced DBS check for Adults – this is rechecked every 3 years
- We do not work with unaccompanied children or young people.
- All employees and volunteers must supply 2 references prior to engagement.
- All employees receive safeguarding training on induction to an appropriate level for their role. This is updated every 3 years
- All volunteers receive safeguarding training on induction and a refresher every 3 years.
- All employees receive a staff handbook on induction.
- All volunteers receive a volunteer handbook on engagement.
- All employees and volunteers have read, understood and agreed to the code of conduct and made a declaration of fitness for the role prior to commencing work with us.

APPENDIX 4 - Personal Safety and Lone Working

This extract is taken from the BSG Health & Safety Policy and should be read in conjunction with that policy.

1.1. Principles

- 1.1.1. Employees and volunteers should give priority to their own personal safety and comfort. The BSG does not knowingly accept referrals of people with a history of violence but other people or animals within the household may pose a risk.
- 1.1.2. Employees and volunteers should continually make their own assessment of the situation. If a person is, or appears to be, aggressive or intoxicated, they should not enter the premises or leave immediately.
- 1.1.3. Employees and volunteers do not have to accept abusive or racist language, and guidance on how they should respond to such behaviour is issued on induction.
- 1.1.4. Employees and volunteers have a right to leave any situation that makes them feel uncomfortable. They should trust their intuition, act on any warning signs and leave immediately then contact the Manager as soon as possible. If the employee or volunteer lives alone they may like to tell a friend or neighbour where they will be, and when they expect to be back.
- 1.1.5. The BSG will always support an employee or volunteer should their intuition warn them of a potentially risky situation

1.2. Recommended procedures

- 1.2.1. Employees or volunteers who are working on their own in the office should not allow access to casual visitors who have no appointment.
- 1.2.2. All windows and entry doors to the office will be lockable
- 1.2.3. Employees who are going to be away on Blackdown Support Group business should make it clear to other employees (and have put in the diary) where they will be, for how long, and how they can be contacted.
- 1.2.4. Employees and volunteers are routinely asked to inform the Blackdown Support Group who they wish to be contacted in the event of an emergency, giving contact details, on induction. They should notify the office in the event of any change in these details.

1.2.5. Employees and volunteers who carry money for the BSG have the right to be accompanied by another person.

1.2.6. Visits to the bank should not be at a regular time.

1.2.7. Employees and volunteers should never put themselves at risk for the Blackdown Support Group

1.2.8. All incidents of aggression or violence and any threat to personal safety must be reported to the Manager and Designated Person and recorded.

1.3. Risk Assessment

1.3.1. Employees must undertake a risk assessment when arranging an appointment with a service-user. They should ask the following questions:

1.3.1.1. Where exactly is the property? Is the property difficult to find, or in a particularly rural area?

1.3.1.2. Are there any access issues? e.g., are there any steep steps?

1.3.1.3. What name does the service-user like to be known by?

1.3.1.4. Is parking available?

1.3.1.5. Are there any potentially dangerous animals or pets?

1.3.1.6. Does the service-user wish to have a relative or friend present?

1.3.1.7. Is there any history of violence, aggressive behaviour or domestic violence within the household? Any relevant information will be shared with the employee or volunteer.

1.3.1.8. If the visit is to apply for a benefit on behalf of the service-user, does the service-user have the relevant documents, such as their National Insurance Number, medical letters and their current prescription list?

1.3.2. The employee or volunteer should also:

1.3.2.1. Confirm the date and time of the appointment.

- 1.3.2.2. Consider any potential additional issues of appointments taking place during the hours of darkness.
- 1.3.2.3. Ensure the service-user has the office telephone number, should they need to cancel the appointment.
- 1.3.2.4. Ensure someone the volunteer knows, and trusts is aware of the appointment and the expected time of return to the office or home

1.4. Risk Mitigation

1.4.1. The recommendations below apply to employees and volunteers alike.:

- 1.4.1.1. Prioritise their own personal safety. This could mean leaving the premises, seeking another person for support or calling the police. Do not take off coats or unpack any papers until the situation feels comfortable. Remember - when in doubt get out.
- 1.4.1.2. Employees and volunteers are urged to leave a risky situation immediately. Where this is impossible, help must be summoned, including calling for police support when appropriate.
- 1.4.1.3. Consider arranging to meet the service-user outside of their home if this might be preferable.
- 1.4.1.4. Do not enter any property, particularly a service-user's home, if feeling unsure or uncomfortable with the situation. If already inside the property, make an excuse and leave.
- 1.4.1.5. It may be preferable to make the first contact by telephone. During this contact information such as whether it is likely that other people will be there and who they are should be obtained.
- 1.4.1.6. Be punctual. Delayed or early arrival (even by a few minutes) can be upsetting to the service-user. If you are unavoidably delayed, you must ring and explain and reassure.
- 1.4.1.7. Ask the service-user to lead the way so you are behind them, not the other way round.
- 1.4.1.8. ID cards should be carried at all times and shown to the service-user on arrival.

1.4.1.9. Always be prepared to leave immediately.

1.4.1.10. Ask the service-user to turn off the TV or radio if you consider them a distraction.

1.4.1.11. If appropriate, the service-user should be reminded that everything discussed will be treated in confidence.

1.4.1.12. When leaving ensure that all belongings and relevant documents are taken away.

1.4.1.13. Any concerns about anything arising from the visit, should be advised to the Manager as soon as possible after the visit.

1.5. Boundaries

1.5.1. Service-users will have the nature and limits of our services explained to them. If the service-user asks an employee or volunteer to do something that they are not happy with then they must advise the service-user that they will consult with the Manager first.

Signs of aggression

- Aggressive body language: crossed arms, hands on hips, a wagging finger, a raised arm in challenge or confrontation.
- Facial expression or not: angry expression; facial colouring; bulging eyes; uncomfortable staring with or without blinking; cold unresponsive eyes that makes you feel uncomfortable.
- Behaviour: jerky, erratic, threatening or inappropriate.
- Personal space: too close for comfort and no respect of your comfort zones.
- Verbal abuse: swearing, insulting, threatening, offensive language.
- Avoid being followed around inside/outside

Appendix 5 – Risk Assessment documents

1. Service User Registration form



SERVICE USER REGISTRATION FORM

Date of registration ___ / ___ / ____

Person completing

Designation

1 Person providing information

TITLE	SURNAME	FIRST NAME	Relationship to Service-User
CONTACT DETAILS (if different from service-user's)			

Data Privacy Notice to be read to Service-user or representative

2 Service-user details

TITLE	SURNAME	FIRST NAME

Is the service-user already registered with BSG? If yes, check details below are correct and accurate. If no complete all boxes.

GENDER	ADDRESS	PREFERRED NAME
M / F / NB Prefer not to say		
DOB		WHAT3WORDS LOCATION (if known)
	POSTCODE	
HOME PHONE		
MOBILE PHONE		
EMERGENCY CONTACT		

EMAIL ADDRESS			
MEDICAL PRACTICE		DOCTOR (if known)	
ANY HEALTH CONDITIONS THE BLACKDOWN SUPPORT GROUP SHOULD BE AWARE OF? (particularly conditions that affect mobility, sensory loss or could result in altered consciousness or disturbed behaviour)			
DISABLED? (List conditions above)	Y/N	BLUE BADGE HOLDER?	Y/N
MOBILITY AIDS: (Record details)	WHEELCHAIR USER?	WALKING AID USER?	
ANY SIGHT / HEARING LOSS?			
ANY MEMORY LOSS?			
CAN THE SERVICE-USER ENTER / EXIT A CAR WITHOUT ASSISTANCE?		Y/N	
HOW RELIABLE IS MOBILE PHONE COVERAGE AT THE PROPERTY?			
ARE THERE ANY ANIMALS THAT MIGHT POSE A THREAT TO VISITORS AT THE PROPERTY?			

3 Which services are being requested?

TRANSPORT	
One-off	
Occasional	
Regular	
LUNCH CLUB	
FOOT CARE	
BEREAVEMENT SUPPORT	
SITTING SERVICE	
BEFRIENDING	
FORM FILLING	
OTHER	

4 Property details

CAN THE PROPERTY BE SEEN CLEARLY FROM THE STREET?	
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WHAT IS THE ACCESS TO THE PROPERTY LIKE?		
ARE THERE ANY STEPS?		
DRIVEWAY / ROAD PARKING?		
WHICH DOOR SHOULD BE USED?		
DURING HOURS OF DARKNESS IS THERE ADEQUATE LIGHTING?		
ELIGIBILITY TO RECLAIM TRANSPORT EXPENSES FROM NHS UNDER HTCS? (If claiming income support, jobseekers allowance, working tax credit with child tax credit, working tax credit with disability element, child tax credit, pension credit, income-based employment and support allowance)		Y/N
HOW DID YOU HEAR ABOUT US?	Referral	Word of mouth
	Website	Social Media
	Poster/Leaflet	Parish Magazine
NOTES FOR OFFICE USE		
NOTES FOR VOLUNTEER		

2. Home visit risk assessments

Staff Pre-Visit questions – To be completed prior to home visits.

Record all risks identified during the call and report any concerns to the Manager before undertaking a home visit.

Question	Yes	No	Comment
Are there any known risks associated with this Service User?	<input type="checkbox"/>	<input type="checkbox"/>	
What type of home do you live in? E.g. House, bungalow, flat, mobile home, boat	<input type="checkbox"/>	<input type="checkbox"/>	
Will anyone else be home when we visit? If so, who?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have any pets? If so, what type of animal?	<input type="checkbox"/>	<input type="checkbox"/>	
In case of staff allergies or reactive behaviours by the pet.			
Does anyone in the household have flu, COVID or Norovirus?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have domiciliary carers attending and if so, will they be present when we visit?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have a lifeline/call alarm in the house? Or any cameras?	<input type="checkbox"/>	<input type="checkbox"/>	
Is this a smoke/vape free environment?	<input type="checkbox"/>	<input type="checkbox"/>	

Staff Home Visit Risk Assessment

Dynamic Risk Assessment: People	Yes	No	Comment
Confirm whether the Service User requires assistance to mobilise? Is there a risk of falls? If yes, advise them we would call emergency services should an emergency occur, e.g. fire	<input type="checkbox"/>	<input type="checkbox"/>	
Confirm there is no personal care requirement:	<input type="checkbox"/>	<input type="checkbox"/>	

Help with toileting, assistance with food, drink or medication. These are Care Needs and cannot be delivered by a volunteer.			
Is there anything we need to be aware of which could upset the Service User e.g. noise, excessive pain, light etc? How is this presented, e.g. verbally, not wanting to interact, hand gestures, facial expressions?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there any other concerns? E.g. Hygiene, health and safety, Safeguarding concerns	<input type="checkbox"/>	<input type="checkbox"/>	

Dynamic Risk Assessment: Property	Yes	No	Comment
Is there mobile phone coverage both inside and outside of the property?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there any access issues?	<input type="checkbox"/>	<input type="checkbox"/>	
If the external door is locked, is the key easily accessible for exit?	<input type="checkbox"/>	<input type="checkbox"/>	
Paths and floor surfaces are level, non-slip and free of trip hazards?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there any concerns about the areas to be used by volunteers? E.g. Drug or alcohol paraphernalia	<input type="checkbox"/>	<input type="checkbox"/>	
Is lighting and ventilation sufficient?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there enough seating? In which room will volunteer visits take place?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there any concerns about the property? E.g. Hoarding, unclean, building in disrepair, fire hazards, adequate heating, access to WC?	<input type="checkbox"/>	<input type="checkbox"/>	

Home Visit Questionnaire

Date of Visit:

Service-user Name:

Service-user Address:

Service-user Telephone number:

Referred by:

Next of Kin:

Next of Kin Telephone Number:

Give a brief summary of the situation	
Does the Service User have any medical conditions that we need to be aware of?	
Are there any communication difficulties or preferred methods of communication?	
Does the Service User have any Interests or hobbies? What would you like to do with the volunteer during your time together? E.g. Chat, reading, knitting, card making	
What did the Service User used to do for work?	
Does the Service User make food independently? Explain that the volunteer is unable to do this	
Are there particular days or times you would like a visit? When would you like the service to start?	

For sitting service, do they have an Emergency Plan, including an Alert Card?	
Any other relevant details?	

WHAT OUR HOME VISITING SERVICES OFFER

Volunteers can visit someone living alone for social purposes, sit with a cared for person to enable carer respite, or support with form filling. They may

- Make drinks
- Read or take part in other activities such as puzzles
- Listen
- Support with form filling where requested
- Refer back to BSG office re any problems or anxieties

WHAT THE SERVICES ARE UNABLE TO OFFER

- Physical support to Service Users to move around
- Administration of medication of any kind including creams and eye drops
- Washing and dressing
- Preparation of meals
- Assisting with feeding
- Domestic services (cleaning, laundering etc)
- Any kind of care services – continence, wound care etc.
- Shopping – please request this separately via the office
- Prescription delivery – please request this separately via the office

Additional comments:

This Risk Assessment has been completed by the following person:

Name:

Signed:

Date:

Transport booking checklist

