

## **BUDDIES COMMUNITY CARE LTD.**

### **Safeguarding Policy**

The safety and welfare of all children and young people is central to **BUDDIES COMMUNITY CARE LTD.**

We are all responsible for the protection of children, young people and vulnerable adults and all concerns about a child/young persons or vulnerable adults safety or well-being will be followed up and dealt with as quickly and as sensitively as possible.

We seek to ensure the safest possible environment and a simple and straightforward process for reporting as possible. Staff accept and recognize their responsibilities to develop awareness of any issues which may cause a vulnerable person harm.

#### **Principles**

- 1: **BUDDIES COMMUNITY CARE LTD** is fully committed to providing high-quality community based services to adults/children and families.
- 2: The needs of our service users are our first concern and we will always act to ensure their safety and protection. Our code of practice is outlined in Appendix 1.
- 3: The best results for vulnerable person/s are achieved in partnership with their parents/ care-givers and we will work in this way at all times, unless we feel that this could cause further harm to the person – in which case concerns will be followed up appropriately to ensure the person is kept safe.
- 4: All **BUDDIES COMMUNITY CARE LTD.** procedures and guidance has an orientation towards the protection of the vulnerable people we support; if we are concerned that a person under our care is being abused or harmed in any way we will report this to the Social Services department.
- 5: Any help offered, in particular personal care, should be in the best interest

of that child, young person or adult and/or inclusive of the family and we will work transparently and flexibly with parents/care-givers, adults, young persons'/children and other agencies to ensure that this happens.

6: We recognize some groups of adults/children may be most vulnerable to abuse, for example, people with a disability, and this policy and procedure applies to all people irrespective of gender, ethnicity, disability, sexual orientation, or religion as set out in **BUDDIES COMMUNITY CARE LTD.** equal opportunities statement.

7: Safeguarding will be put in place to maximize a every service users right to protection, the following is applicable to everyone but specifically to children – Each child will know that they have the right to:

- Be safe – Teach children that everyone has equal rights. Tell children that no one should take away their right to be safe.
- Protect their own bodies – Children need to know that their body belongs to them.
- Say NO – Tell children that it is all right to say no to anyone if that person tries to do something to them that they feel is wrong. Most children are taught to listen to and obey adults and older people without question. Disabled children in particular are taught to be compliant.
- Get help against bullies – Bullies usually pick on younger children. Tell children to enlist the help of friends or say no without fighting and to tell an adult. Bullies are cowards and a firm, loud 'no' from a gang of children with the threat of adult intervention often puts them off.
- To tell – You must assure children that no matter what happens you will not be angry with them and that you want them to tell you of any incident that frightens or confuses them or makes them unhappy.
- To be believed – When children are told to go to an adult for help they need to know that they will be believed and supported. This is especially true in the case of sexual abuse which children very rarely lie about. If the child is not believed when he or she tells, the abuse may continue for years and result in suffering and guilt for the child.

- Not to keep secrets – Teach children that some secrets should never be kept, no matter if they promised not to tell. Child abusers known to the child often say that a kiss or touch is ‘our secret’. This confuses the child who has been taught to keep secrets.

## **BUDDIES COMMUNITY CARE LTD.**

### **Service User Protection Policy**

#### ***Introduction***

#### ***The purpose of this policy is:***

To ensure that all people using the **BUDDIES COMMUNITY CARE LTD** services are kept safe and that concerns are followed up in the correct way and to ensure everyone including parents/caregivers, know what should happen and what is expected of them.

#### ***Keeping vulnerable people safe and safe staffing***

Recruitment of **BUDDIES COMMUNITY CARE LTD**. Staff will follow the policy and procedures of **BUDDIES COMMUNITY CARE LTD**. This includes undertaking checks with the Disclosure and Barring Service (DBS), health checks, and taking up two references. All appointments are subject to this vetting procedure and a probationary period.

Staff will be made aware of vulnerable person protection procedures, health and safety and safe practice issues of part of their induction. All staff will be required to undertake basic safeguarding training (POVA Child and Adult). All staff will receive regular supervision from their identified line manager.

A risk assessment will be undertaken to ensure safe procedures for all staff. Please see appendix 2, this outlines appropriate behaviour when in contact and supervision of vulnerable adults/children.

If anyone has a concern about a member of staff or volunteer and their behaviour towards a service user, the responsible/service manager or Executive Director should be informed immediately. Appropriate action will then be taken to ensure the safety of the vulnerable people we support.

### ***Safe environment***

All premises and equipment used will be risk assessed to ensure safety and suitability as part of their initial assessment of needs – and whether **BUDDIES COMMUNITY CARE LTD.** can meet those needs.

The people using **BUDDIES COMMUNITY CARE LTD.** namely vulnerable children and adults often need and enjoy close contact with those caring for them, staff will be aware of boundaries and will ensure when any form of tactile engagement takes place that it is carried out in the open and with the presence of other adults and explicitly identified within a care plan All workers will undertake first aid training and there will always be a trained first aider on the premises, all accidents will be recorded in line with Health & Safety regulations.

### ***3: Dealing with and identifying concerns***

Many concerns arise on a day-to-day basis, a vulnerable person may have an accident at home, become ill, or be behaving differently. In most cases these can be dealt with quickly and easily by discussions between staff members and parents/caregivers, further advice or help may be offered if needed. Where appropriate these may be recorded in the accidents and incidents logbook and incident and accident forms completed – or an ABC chart.

Sometimes concerns can be more worrying because it is clear that the service user may be affected by what is happening to them. They may be being harmed or hurt in some way.

There are many ways in which a person can be harmed;

### **Physical abuse**

Physical abuse can include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm. Physical harm may also be caused when a parent/caregiver feigns symptoms or deliberately causes ill health.

### **Neglect**

Neglect is the persistent failure to meet someone's basic physical or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent/caregiver failing to provide adequate food, clothing and shelter, failing to protect them from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to a vulnerable person's basic emotional needs.

### **Sexual abuse**

Sexual abuse involves forcing or enticing a vulnerable person to take part in sexual activities, whether or not they are aware of what is happening. The activities may involve physical contact, including penetration for example, rape or buggery, or non-penetrative acts. They may include non-contact activities, such as involving them in looking at, or in the production of pornographic material or watching sexual activities or encouraging children to act in sexually inappropriate ways.

### **Emotional abuse**

Emotional abuse is the persistent ill treatment of a vulnerable persons so as to cause severe and persistent adverse effects on their emotional behaviour. It may involve conveying to them that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may feature age or development inappropriate expectations being imposed on them. It may involve causing the vulnerable person to frequently feel frightened or in danger, or the exploitation or corruption of the child. Some level of emotional abuse is involved in all types of ill treatment though it may occur alone. Please see Appendix 3 for full definitions of abuse.

Concerns about a child may come to the attention of **BUDDIES COMMUNITY CARE LTD. staff** in a number of ways:

- 1: Through observation of behaviour, which may indicate that it is likely that he/she is being abused.
- 2: The service user may disclose abuse.
- 3: Information may be given by parents, other people, or agencies.
- 4: A service user may show some signs of physical injury of which there seems to be satisfactory explanation.
- 5: Something in the behaviour of one of the workers or young person, or in the way the worker or young person interacts with a vulnerable person, alerts them or makes them feel uncomfortable in some way.
- 6: Observing one service user, abuse another.

There may be barriers to vulnerable people telling: the power of relationships between adults and children, or caregiver and service user, should not be underestimated nor should the deliberate and skilled way that abusers target their victims. A service user may not tell because:

- 1: Are scared because they have been threatened.
- 2: Believe they will be taken away from home/ or jeopardies their support system.
- 3: Believe they are to blame.
- 4: Think that it happens to everyone.
- 5: Feel embarrassed.

6: Feel guilty.

7: Don't want to get the abuser in trouble.

8: Have communication or learning difficulties, or some other impairment of their mental capacity.

9: May not have the vocabulary, or capacity to articulate what happened.

10: Are afraid they won't be believed.

11: Believe they have told maybe by dropping hints but haven't been believed so don't bother again.

12: A service user may lack capacity, and the ability to communicate their concerns.

The diligence and observation skill of **BUDDIES COMMUNITY CARE LTD.** staff will be relied upon for any indication of abuse

All abuse thrives on secrecy and needs to be handled in a sensitive, accepting way. In order to achieve this **BUDDIES COMMUNITY CARE LTD.** staff may have to overcome certain barriers also as:

1: Sometimes it may be hard to believe what is being said.

2: It may be difficult that the suspicion may be about someone that is known and/or trusted..

3: 'The fear of getting it wrong'.

4: The fear of what consequences there may be for 'getting it wrong' for the child, for the family, and for themselves.

5: Worry that it may make it worse for the service user.

6: Believe that the services are stigmatizing.

7: Simply do not want to be involved.

8: Do not have the necessary information on what to do or who to contact.

### **Responding to a concern**

It is not the responsibility of **BUDDIES COMMUNITY CARE LTD.** staff to investigate safeguarding allegations or concerns but to identify concerns and pass them on to the Social Services or the Police. **BUDDIES COMMUNITY CARE LTD.** have a responsibility to follow local procedures.

If a staff member has a concern about a vulnerable person, they should:

- 1: Take appropriate action if there is a need of urgent attention.
- 2: Collect as much information as possible about the situation – this may be from the service user, parent, caregiver, or other workers and should include date and time of the incident or disclosure, parties who were involved, what was said or done by whom and any further actions. It may also be helpful to record perception of emotional and physical presentation.
- 3: Be open about the concern and make it clear they will have to tell others.
- 4: Take their concern to their line manager as soon as possible and within the same working day to their line-manager if their manager is not available.
- 5: Complete the appropriate incident form after discussion with the manager.

It is the responsibility of the **BUDDIES COMMUNITY CARE LTD.** responsible manager to consider the information and to decide what action needs to be taken. This should be clearly recorded on the appropriate incident form and if the manager needs help in making a decision, they should speak with a senior manager or with the child protection co-ordinator / duty officer at the Social



Services. If no further action is considered necessary the reasons why should be documented and the form should be placed on file and recorded by administrative staff. Wherever possible parents/caregivers should be made aware of this record.

If the concern is to be managed within **BUDDIES COMMUNITY CARE LTD.** either monitoring the situation or by working with the service user and parents/caregivers on specific issues, it should be made clear to all relevant staff and to parents what is being done and what is expected of them. The manager should review what has been happening within an agreed period of time.

### **Referral to Social Services**

A safeguarding referral form should be completed as far as possible; this will ensure that all the information is to hand when making the referral. The worker should not delay if all information is not available.

A referral should be made to the Social Worker involved with the family or to the Duty Officer, if the family's Social Worker is not available or if no Social Worker is involved. The **BUDDIES COMMUNITY CARE LTD.** Worker and the Social Worker should agree what will happen next. The referral form should be completed and signed and sent to Social Services within 24 hours of the telephone referral. A copy should be placed in their file.

If **BUDDIES COMMUNITY CARE LTD.** is not already working with the family, the manager should identify a worker to follow up the referral and ensure any agreed action is taken.

The parents/caregivers of the child should be involved as far as possible, unless it has been decided that this would put the service user at further harm. It should be clear about any decisions made and what will happen next. The manager should support the worker in making the decision and be available to give advice and guidance, as necessary.

### **4: Working with Social Services and other agencies.**

**BUDDIES COMMUNITY CARE LTD.** provides universal, non-stigmatizing community services to people between 16-65. Families decide to use our services and attending any activities. If Social Services or any other agency have concerns about a service user, the family can be encouraged or supported to use our services, but they do always have a choice to refuse.

We will always work within the principle stated at the beginning of this policy; we will work with service users and parents/carergivers in an open and honest manner and, as far as possible offer support which is flexible to meet the needs and wishes of the family. Parents/carergivers will be involved in making decisions and with any work or contact involving other agencies, unless this would put the service user at risk.

Although Social Services may be the accountable body for the **BUDDIES COMMUNITY CARE LTD.** the community service provided is not part of the core Social Services Activities. **BUDDIES COMMUNITY CARE LTD.** do not have statutory responsibilities, nor do they have access to information held by Social Services on their databases.

**BUDDIES COMMUNITY CARE LTD.** may carry out risk assessments on behalf of the Social Services, whilst procuring services, but statutory responsibility will remain with the local authority with all responsibilities and monitoring arrangements being agreed explicitly and individually.

## **Appendix 1**

### ***BUDDIES COMMUNITY CARE LTD. Code of Practice***

**BUDDIES COMMUNITY CARE LTD** will:

- Treat all service users with respect
- Provide an example of good conduct you wish others to follow
- Respect service users right to personal privacy / encourage young people and adults to feel comfortable and caring enough to point out attitudes or behaviours they do not like.
- Remember that someone else might misinterpret your actions., no matter how well intentioned.

- Recognise that special caution is required when you are discussing sensitive issues with children, young people and vulnerable people in general.
- Challenge unacceptable behaviour and report all allegations/suspensions of abuse.

You must not:

- Have inappropriate physical or verbal contact with children or young people, or service users.
- Allow yourself to be drawn into inappropriate behaviour/make suggestive or derogatory remarks or gestures in front of children young people, and vulnerable adults.
- Jump to conclusions about others without checking facts
- Either exaggerate or trivialize abuse issues
- Show favouritism or exclusivity to any individual
- Believe 'it could never happen to me'
- Take a chance when common sense, policy, or practice suggests another more prudent approach.
- Purchase or 'treat' an individual suggesting exclusivity through gifts of food, or other expense, without full disclosure and consultation, outlining the use of own funds in those circumstances.

## **Appendix 2**

### **Protecting Children/Young People/Vulnerable Adults And Staff.**

#### **A: Contact**

You can reduce likely situations for abuse and help protect team members from false accusations by ensuring that as a general rule, it doesn't make sense to:

- Spend excessive amounts of time alone with children/young people and vulnerable adults away from others.
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- Take children/young people/vulnerable adults alone in a car on journeys, however short without proper permissions and risk assessment/care planning – otherwise than in an emergency.
- Take your children/young people or vulnerable adults to your home.

When it is unavoidable that these things happen, they should only occur with the full knowledge and consent of someone in charge of the organization and/or the service user/responsible person

## **B: Relationships With Children/Young People**

You should make it clear to all your staff in your organisation that they should never:

- Engage in rough physical games including horse-play.
- Engage in sexually provocative games.
- Allow or engage in inappropriate language unchallenged.
- Make sexually suggestive comments about or to a child/young person, even in fun.
- Let allegations a child makes be ignored or unrecorded.
- Do things of a personal nature for children that they can do themselves.

## **C: Restraint**

Restraint is where a person is being held, moved or prevented from moving, against their will, because not to do so would result in injury to themselves or others or would cause significant damage to property.

Restraint must always be used as a last resort, when all other methods of controlling a situation have been tried and failed. Restraint should never be used as a punishment or to bring out compliance (except where there is a risk to injury).

Only staff who are properly trained in restraint techniques should carry it out. A young person should be restrained for the shortest period necessary to bring the situation under control.

All such incidents should be entered into the 'Restraint Log Book', detailing the facts of the behaviors, witnesses, who restrained the child/young person

and how, what other methods had been tried and what follow up action took place.

A restraint policy applies to all young people equally, regardless of age or sex.

It is acceptable for a member of the opposite sex to restrain a child because it is being used to prevent a serious injury. There should be a programme of training in place on restraint procedures.

#### **D: Intimate care**

It may sometimes be necessary for **BUDDIES COMMUNITY CARE LTD.** staff to do things of a personal nature for service users, particularly if they are very young or disabled. These tasks should only be carried out with the full understanding and consent of parents/caregivers. Either as part of a care plan, with accompanying consent and person centred interventions and procedures followed, or otherwise in an emergency situation that requires this type of help, parents/caregivers should be fully informed, as soon as reasonably possible. In the event it is unplanned, then an urgent care plan review and assessment of continence needs carried out.

In such situations, it is important that you ensure that all staff are sensitive to the individuals and undertake personal care tasks with the utmost dignity/ privacy and discretion.

#### **E: Relationships Of Trust**

‘The inequality at the heart of a relationship of trust should be ended before any sexual relationship begins’ Caring for Young People and the Vulnerable? Guidance preventing abuse of trust (Home Office 1999).

This statement recognises that genuine relationships do occur between the different levels of staff and participants in a group but that no intimate relationship should begin whilst the member of staff is in a ‘position of trust’ over them.

The power and influence that an older member of staff has over someone

attending a group or activity cannot be under-estimated. If there is an additional competitive aspect to the activity and the older person is responsible for the younger person's success or failure to some extent, then the dependency of the younger member upon the older will be increased. It is therefore vital for staff to recognise the responsibility they must exercise in ensuring that they do not abuse their position of trust. Young people aged 16-18 can legally consent to some types of sexual activity; however, in some provisions of legislation they are classified as children.

In certain circumstances the 'abuse of trust' is a criminal offence (Sexual Offences (Amendment) Act) 2000 (UK wide).

### **Supervision Of Children/Young People And Vulnerable Adults.**

Making arrangements for the proper supervision of vulnerable people, but in particular children and young people is one of the most effective ways of minimizing opportunities for service users to suffer harm of any kind whilst in your care.

### **Planned Activities**

- Organisers are responsible for the welfare and safety of children/young persons or service users for the whole time they are away from their home, or under the supervision of **BUDDIES COMMUNITY CARE LTD** staff.
- All vulnerable persons should be adequately supervised and engaged in suitable activities – in keeping with their capacity, level of independence and any agreed care plans, or ensure that these are offered and available to them.
- In circumstances when planned activities are disrupted, e.g. due to adverse weather conditions, then organisers should have a number of alternative activities planned.
- Parents/authorities should be given full information about a trip, including details of the programme of events, the activities in which the children will be engaged and the supervision ratios.

## Supervision Of Children

- Leaders in charge must be satisfied that those working and adults who accompany group parties are fully competent to do so.
- Children must be supervised at all times, preferably by one or more adults. Service users must be supervised according to agreed staffing ratio's.
- Children must not be left unsupervised at any venue whether it be indoors or out, nor vulnerable adults, or anyone not assessed as being safe to do so.
- Staff should know at all times where service users are and what they are doing.
- Any activity using potentially dangerous equipment should have constant staff supervision.
- Dangerous behaviour by children/young person should not be allowed – individual plans for management of behaviour which challenges, should be followed.

## Appendix 3

### Definition Of Abuse

### Recognising Abuse

Recognising child abuse is not easy, and it is not **BUDDIES COMMUNITY CARE LTD.** staff members responsibility to decide whether or not abuse has taken place or is a child/young person or vulnerable adult is significantly at risk, Everybody does, however, have a responsibility to act if you have a concern. The following information is not designed to make you into an expert, but it will help you to be more alert to the signs of possible abuse.

### Physical abuse

Most children/young people and vulnerable adults will collect cuts and bruises in their daily life. These are likely to be in places where there are bony parts of their body like elbows, knees, and shins. Either through play, positioning,

activity or lack of activity dependent on age and mobility.

Sometimes, however, service users may have bruising which can almost only have been caused non-accidentally. An important indicator of physical abuse

is where bruises or injuries are unexplained or the explanation does not fit the injury, or when it appears on parts of the body where accidental injuries are unlikely, e.g. cheeks or thighs. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern.

Bruising may be more or less noticeable on people with different skin tones or from different racial groups and specialist advice may need to be taken.

### **The physical signs of abuse may include:**

- Unexplained bruising, marks, or injuries on any part of the body.
- Bruising which reflects hand marks or fingers (from slapping or pinching).
- Cigarette burns.
- Bite marks.
- Broken bones.
- Scolds.
- Unmanaged or untreated wounds, from pressure, being left in position for extended periods, personal care needs being omitted.

### **Changes in behaviour which can also indicate physical abuse:**

- Fear of parents/caregivers or abuser being approached for an explanation.
- Aggressive behaviour or severe temper outbursts.
- Flinching when approached or touched.
- Reluctance to get changed, for example wearing long sleeves in hot weather.
- Depression.
- Withdrawn behaviour.
- Running away from home, or location of abuse.

### **Recognising Sexual Abuse**

Adults who use children/young people or service users to meet their own sexual needs abuse both boys and girls of all ages, including infants and toddlers, and those of adolescent age groups, young people without capacity



and the elderly, those with dementia and lacking capacity.

Usually, in cases of sexual abuse it is the persons behaviour which may cause you to become concerned, although physical signs can also be present. In all cases, children/young people and vulnerable adults who talk about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

**The physical signs of sexual abuse may include:**

- Pain or itching in the genital/anal areas.
- Bruising or bleeding near genitals/anal areas.
- Sexually transmitted diseases.
- Vaginal discharge or infection.
- Stomach pains.
- Discomfort when walking or sitting down.
- Pregnancy.

**Changes in behaviour which can also indicate sexual abuse include:**

- Sudden or unexplained changes in behaviour, e.g. becoming aggressive or withdrawn.
- Fear of being left with a specific person or group of people.
- Having nightmares.
- Running away from home.
- Sexual knowledge which is beyond their age or development level.
- Sexual drawings or language.
- Bedwetting.
- Eating problems such as overeating or anorexia.
- Self-harm or mutilation, sometimes leading to suicide attempts.
- Saying they have secrets that they can't tell anyone about.
- Substance or drug abuse.
- Suddenly having unexplained sources of money.
- Not allowed to have friends (particularly in adolescence).
- Acting in a sexually explicit way.

## Recognising Neglect

Neglect can be a difficult form of abuse to recognise yet have some of the most lasting and damaging effects on children/young people and vulnerable adults.

### **The physical signs of neglect may be:**

- Constant hunger, sometimes stealing food from others.
- Constantly dirty or 'smelly'.
- Loss of weight, or being constantly underweight.
- Inappropriate dress for the conditions.

### **Changes in behaviour which can also indicate neglect may include:**

- Complaining of being tired all the time.
- Not requesting medical assistance and /or failing to attend appointments.
- Having few friends.
- Mentioning their being left along or unsupervised.

The above list is not meant to be definitive but used as a guide to assist you. It is important to remember that many children/young people and vulnerable adults will exhibit some of these indicators at some time, and the presence of one or more should not be taken as proof that abuse is occurring.

There may well be other reasons for changes in behaviour. It is better to take any concern seriously, and to be wrong, than to ignore it - and risk the continuation of abuse – the onus is upon the organisation to cultivate a culture where we respect and welcome these processes.

### *Facts about abuse:*

- Most vulnerable people are abused by those they know and trust.
- The reported cases of abuse are just the tip of the iceberg of the cruelty, exploitation, and neglect to which vulnerable people in our society are subjected.
- Disabled children are most vulnerable to abuse. They are more dependent on intimate care and sometimes less able to tell anyone or escape from abusive situations. But this is applicable to any vulnerable person with limited capacity.

- Children/young people and vulnerable adults very rarely make false accusations that they have been abused and in fact frequently deny the abuse or take back an accusation after they have made it.
- Service users who talk about the abuse fear the consequences of telling – if things are bad, perhaps they may get worse.
- Abuse has serious long-term harm effects on children and young people and vulnerable adults. If untreated, the effects of abuse can be devastating and continue into adulthood.
- Social Services will only remove children/young people/vulnerable adults from their home or designated placement where there is actual, or a risk of, significant harm and if the person is in real danger of further abuse.
- Abuse is equally as common among all social classes, professions, cultures, and ethnic groups.
- Sexual abuse is an abuse of the caregivers power – it is the wrongful use and exploitation of the power adults in responsible positions have over children/service users and vulnerable adults.
- In most reported incidents of sexual abuse the abuser is someone known to the child/young person or vulnerable adult..
- It is not only men who sexually abuse people– women also abuse but the most commonly quoted figure is that around 90% of all sexual abuse is by men, most of whom are heterosexual.
- A child/young person or vulnerable adult is never to blame for sexual abuse.
- There are rarely any obvious signs that someone has been sexually abused. Sexual abuse is very hard to ‘diagnose’, even for professionals.
- The majority of calls to help-lines from children relate to bullying.
- If unchecked, bullying can profoundly damaging to the victim in both the short and longer-term, emotionally, physically or both.
- Bullying can leave children with feelings of worthlessness and self-hatred; of isolation and loneliness.
- At its worst, bullying can result in a child attempting suicide.
- Violence between parents (domestic violence) can have a profoundly diverse affect on children, causing intense anxiety, fear, and occasionally physical injury.
- Recent research has shown that children’s development can be adversely affected by serious parental mental illness without

- appropriate or effective treatment, and by problem alcohol or drug abuse.

#### Appendix 4

**BUDDIES COMMUNITY CARE LTD.** provides community based care services to vulnerable persons requiring different types of support between the ages of 16-65.

*Other factors relating to the reporting of concerns relating to the care of children/young persons under our care:*

*Whilst at all times we comply with our confidentiality policy in full we reserve the right to inform statutory authorities (such as social services or a child's school) if any of the following occurs:*

- *A child is suddenly removed from our care without prior notice.*
- *A child has multiple unexplained absences or absences which are not congruent with the presentation of the child.*
- *A child is removed from our care without full consideration of the needs of the child ie the child wishes to attend but it interferes with the parents timetable.*

**BUDDIES COMMUNITY CARE LTD** aims to review this policy 6 monthly.

Signed:  (Chief Executive)

Date:..... 05<sup>th</sup> October 2023