



Boundaries Policy

Group Guidelines, Telephone & Video Befriending Volunteer Guidance, Codes of Conduct and Online Safety and Social Media Policy are also relevant and deal with some issues in more depth.

The need for a Boundaries Policy

- Boundaries are limits we set ourselves in everyday relationships, for example what we share of ourselves. They can be set consciously or unconsciously. They are a fundamental part of befriending and help Volunteers know where they stand on various issues such as working limits, conduct and confidentiality. They also avoid confusion which could cloud the development of a relationship.
- Interest Link's service involves several different agencies and individuals working together. A boundaries policy aims to ensure that the expectations and roles of all concerned are made clear from the outset.
- Where these boundaries are challenged, it may be an indication that a relationship is starting to outgrow Interest Link and needs to move beyond the service.
- No matter how detailed this Policy is, issues that are not covered will inevitably arise. In these cases, as in all other cases of uncertainty, or if a change in link activities is considered, the golden rule is always to consult both Carer and Branch Co-ordinator before going ahead.
- These guidelines augment the normal guidance and boundary-setting that takes place during a Volunteer's training and in the creation and support of every link.

A. General boundaries of an Interest Link Volunteer's role.

As a general statement, Volunteers should not be required to do anything which they have not been prepared for, or committed to, and in which Interest Link is unequipped to support them.

1. The commitment made by a Volunteer.

In taking on their general role, Volunteers will have made a commitment to abide by the service's guidelines, most importantly those in the Volunteer agreement.

They will also have committed to giving a certain amount of time to their Volunteering, doing certain activities in certain places. For example, a Volunteer may be committed to meeting their Member every fortnight on a Wednesday afternoon to go shopping and for a coffee for 2 hours in the Member's local town. There may be quite a lot of flexibility in the arrangement and the plan may be to progress to visiting other towns, going to the cinema or making an occasional trip to Edinburgh. However, it may be that the Volunteer has other commitments and that from the beginning it is made clear that the timing, location or activities in the link need to remain constant or only vary, for example in the activities done.

In the example above, the Volunteer has made a commitment to both a certain level of Volunteering and a certain level of flexibility within that Volunteering. It is very important

that all involved are informed of, and appreciate, the limits to the Volunteer's commitment and that the Volunteer does not feel unfairly pressured to increase their commitment. If there is pressure for aspects of the link to be changed there are regular opportunities for this to be expressed through formal and informal feedback to the Branch Co-ordinator and these can then be brought up at a Volunteer's regular supervision.

The commitment asked of a Volunteer does not usually extend beyond meeting up and doing the activities agreed at the time agreed. The relationship often deepens beyond this, as explored in the section on personal relationships, but this is something that must occur naturally and cannot be presumed.

2. Personal relationship between Member and Volunteer. A strong friendship often grows up between the people involved in a link, and a Volunteer may become involved to some extent in the Member's personal life, and vice-versa. As long as the relationship is kept within certain limits, this is a very positive development and is encouraged.

As described in the section on Volunteer's commitments, such a relationship is not regarded as an essential element of a link that must be committed to by a Volunteer: if it occurs, it will do so in the natural course of events.

There are some very specific boundary issue in this area:

a. Volunteer visiting Member's home. The great majority of 1:1 link introductions take place in the Member's home. On occasion, the first few meetings after the introduction will also take place at the Member's home to allow the link relationship to develop. Thereafter, a large proportion of links involve the Volunteer collecting the Member from their home and returning them afterwards.

Beyond this, link activities would normally take place in a Member's home only if they had severe disabilities which made visiting the only option or unless the Volunteer involved needed to be supervised (for example a young Volunteer). In both these cases there would usually be supervision, either by a professional carer or a parent, and a risk assessment carried out of the home environment and any third parties who would be there.

The focus on the agreed activities and the one-to-one nature of the link should be retained. If a change in link activities is considered, or if the link starts to involve the Member's or Volunteer's family or friends, both Carer and Branch Co-ordinator must be consulted before this goes ahead.

b. Member visiting Volunteer's home. It is Interest Link's policy that Members do not visit Volunteer's homes.

c. Overnight stays/weekends/holidays

- Planned overnight trips have been part of Interest Link's service since 2015.
- The circumstances in which they take place are restricted: they usually involve befriending groups, are accompanied and supervised by their Branch Co-ordinator and require a formal plan and risk assessment which must be agreed by the Project Co-ordinator.

Interest Link Borders Boundaries Policy

- Where there are personal care needs, a carer will accompany the trip to provide these.

d. Confidentiality

Interest Link Borders has a Confidentiality Policy which deals with this issue in depth. The firm rule is that Volunteers (and Members) should not disclose any personal information learned in the course of their link. The only exception to this rule is if a Volunteer learns something which causes them concern about the Member's welfare. This could be anything from teasing by other Members to financial impropriety or physical abuse. Any such matter comes under the service's Protection of Vulnerable Adults or Child Protection policies, which give guidance on the steps to be taken. These will always include consultation with the relevant Branch Co-ordinator and may involve other organisations concerned with the Member's welfare and in extreme cases the police.

e. Contact outside 1:1 link meetings

- If both sides consent, telephone numbers are exchanged at introduction or later.
- Swapping contact details is very helpful in ensuring communication over an extended period of time and fixing or changing link meeting times. Beyond this, unless encouraged or suggested by the Volunteer, the general rule is that Members should not make contact with a Volunteer outside these occasions.
- If a Volunteer does not wish to divulge personal contact details, arrangements will be made to avoid this being necessary. These general principles extend to contact via the internet, particularly email and social networking media. This is partly to protect Volunteers' privacy, and maintain confidentiality. It also avoids Members accidentally being introduced into online environments where they might be vulnerable to, for example, cyberbullying.

f. Personal conduct

Everybody involved in a link should be treated with respect and politeness at all times. Volunteers must be told if a Member is likely to display challenging or inappropriate behaviour.

g. Physical shows of affection and other physical contact

- Inappropriate physical contact towards a Member by a Volunteer or Staff member is not allowed.
- Minor physical shows of affection (such as hugging) that are appropriate in the context of the befriending relationship are permitted, as is contact to provide First Aid or prevent injury.
- If a Member makes a show of affection towards a Volunteer or Staff member which is unwelcome or inappropriate, this must be raised with the Branch Co-ordinator (or Project Co-ordinator) and carer.

h. Alcohol

- The general rule is that Volunteers must not consume, or be under the influence of, alcohol when they meet Members.
 - ❖ With the consent of carers, if it is felt by the Member, Volunteer and Branch Co-ordinator involved that some consumption of alcohol is intrinsic to the nature

Interest Link Borders Boundaries Policy

of the friendship and the activities undertaken, Volunteers over the age of 18 may consume a small glass of wine, half a pint of beer or one measure of spirits if the meeting venue is licensed.

- ❖ Such a relaxation of the general rule must be formally agreed to by carers in the signed link risk assessment.
- Intended consumption of alcohol by a Member during a link meeting must be approved by the Branch Co-ordinator and the Member's carer through the risk assessment process. The Volunteer must also be consulted as to whether they are happy with the proposal.
- If a Volunteer will be driving to and from (or during) the link meeting they must ensure their blood alcohol level at these times is zero.

i. Drugs

- A Volunteer using prescribed drugs must be able to adequately assume appropriate responsibility for the person they are linked with or their role in the group.
- Use or being under the influence of of illegal drugs, by a Volunteer or Member during a 1:1 or group meeting is strictly prohibited and may lead to the Volunteer being unable to continue in their role or the Member's withdrawal from the service. This provision includes synthetic drugs or so-called "legal highs".

j. Involvement of Third Parties

- Almost all our links involve third parties in the form of carers, whether family or professional. They are regarded as an integral part of the link and are not PVG checked or risk-assessed.
- If a 1:1 link is to take place at a Member's house, it should be ascertained as part of the risk assessment whether anybody apart from immediate family lives at the house, and whether any occupants have a history of violence or challenging behaviour

3. Financial Issues & Handling money

- The policy of the project is that Members in 1:1 links should pay their own activity expenses as this encourages independence and self-esteem. However this can be waived where needed by Branch Co-ordinators as lack of ability to pay must not be a barrier to using the service.
- In a group setting, Members may be asked to make a contribution of around £4 to activity costs. This will usually be where an outside tutor is involved or the group goes on a trip. Where taxi transport is provided, members may be asked to contribute to this. As with 1:1 links, this can be waived (proactively if necessary) by Branch Co-ordinators.
- Volunteers should never be out of pocket in connection with their Volunteering and are reimbursed all their expenses (including petrol) by Interest Link.
- Volunteers and Members should never lend or borrow money from each other (beyond, say, an arrangement that "I'll pay this time, you pay next time").
- Volunteers do not handle money for members, for example withdrawing cash from an ATM.
- It is acceptable for Members and Volunteers to give birthday and Christmas presents to each other, but the value should be under £10.

B. What Volunteers are Not.

The boundaries for Interest Link befrienders can be looked in terms of the roles they explicitly do not take on. This could be taken negatively, but does provide clear reference points and also clarifies their relationship with other organisations Interest Link works with. A Volunteer should be given sufficient training to be aware of the different roles and so be responsible for setting and monitoring boundaries between the befriending relationship and any other kind of relationship they may have with their service user, and for making this explicit to the service user when appropriate

1. Not a Carer. Volunteers are not expected to take on the formal care duties expected of family or professional carers such as administering medication, moving & handling, assisting eating and going to the toilet.

Their role is that of a friend who is fully aware of the context within which the Member lives their life to the extent that they know of any potential problems that might arise in the course of the social and leisure activities and know what they should do if these arise.

This limitation in the Volunteer role can restrict the potential for link activities where a Member has, for example, severe physical disabilities or health problems. In these cases, the link may be limited to, say, visiting the Member at home.

In some cases, in addition to restrictions imposed by Interest Link, a care provider may impose additional restrictions on Volunteers' activities which prevent them from carrying out tasks such as those identified below as grey areas (such as pushing a wheelchair). It is essential for Interest Link to establish the restrictions imposed by each provider as they vary from provider to provider.

Conversely, carers may sometimes be happy for Volunteers to take a Member out in conditions when we would feel it is not appropriate; for example allowing a Volunteer to take a Member out in public alone when they would insist on two carers accompanying the Member if the provider organised the outing.

a. Epilepsy

The prevalence of epilepsy among adults with learning disabilities is far higher than in the general population. In all cases this is controlled by medication. The Registration and Risk Assessment process will discover if a Member suffers from epilepsy and, in general, if there has been an attack in the previous 6 months the matter will be looked at more thoroughly to see if there is a risk of recurrence such that a link would be inadvisable (or needs to take place in a supervised environment).

In the vast majority of cases, the risk of an attack is minimal and a link can proceed with the informed consent of the Carer. The Volunteer will be told of the situation and time taken to ensure the Volunteer knows what to do in the event of an attack. In addition to advice from Branch Co-ordinators and Carers, Interest Link runs epilepsy awareness training sessions and includes written information in the Volunteer Pack.

Interest Link Borders Boundaries Policy

There are considerable restrictions on the action that even a Carer would be able to take in response to an attack: the clear message that is given to Volunteers is that if an attack starts they should immediately call 999 for a paramedic and, if the attack is violent, clear any obstacles which might cause injury from around the Member. They should then call the Carer and the Branch Co-ordinator.

b. Handling Prescription Medication:

- The usual practice is to ensure that medication is timetabled outside link times.
- The only normal case in which there is involvement with medication is when it is habitually self-administered by a Member without assistance and this is scheduled to occur during the course of the link. In this case, the Volunteer's role would be restricted to reminding the Member to take the medication at the appropriate time and a carer would have the responsibility to check, when they returned to the house, that the medication had been taken.
- Some Members with particular health issues have medical protocols in place, and occasionally this has involved a Volunteer receiving specific training, for example concerning insulin injections, but this is very unusual.

c. Moving & Handling

Volunteers should not be involved in moving a Member in or out of a wheelchair. Moving & handling awareness training is run by Interest Link to make Volunteers aware of the dangers involved for both themselves and a Member in moving & handling (either deliberately or in response to an emergency, such as if a Member falls during a link).

There are some grey areas relating to moving & handling:

If a Member uses a wheelchair but is able to get themselves in and out of a car unassisted, it may be acceptable for a Volunteer to lift the wheelchair into the back of the car. The Risk assessment should identify if this is likely to occur, and the Volunteer should be provided with training by Interest Link. It must be ensured that the Volunteer is physically capable of performing the task without a likelihood of injury to themselves.

Accommodation providers have guidelines for care staff in relation to taking a wheelchair-bound Member on a car journey. In the majority of cases these provide that at least two carers need to be present to assist the Member into or out of a car.

If a Member uses a wheelchair, a Volunteer may push the wheelchair during the link. The Risk assessment should identify if this is likely to occur, and the Volunteer should be provided with training by Interest Link. It must be ensured that the Volunteer is physically capable of performing the task without a likelihood of injury to themselves.

If a Member needs an arm to lean on when rising from a chair or sitting down, or when walking, this may be performed by a Volunteer. The Risk assessment should identify if this is likely to occur, and the Volunteer should be provided with training by Interest Link. It must be ensured that the Volunteer is physically capable of performing the task without a likelihood of injury to themselves.

d. Medical emergencies

Interest Link Borders Boundaries Policy

As outlined in the sections above, in any medical emergency Volunteers should not hesitate to contact the emergency services, usually to request an ambulance with paramedic.

e. First Aid Training

Interest Link aims to make optional First Aid training available to Volunteers. This reinforces the guidelines above concerning action to be taken in an emergency but is provided as something thought useful as a general lifeskill to be encouraged: Interest Link Volunteers are not always qualified First-aiders and it should not be assumed that they are.

Footnote: Under statutory Care regulations, an Interest Link Volunteer may be defined as a “Carer” because, for example, they are providing a social service. This is a potential source of confusion.

f. Minor personal care tasks

There are occasions outlined above where, Volunteers if they are trained appropriately and are agreeable to the role, (and if the Member and carer are also in agreement) could take on minor personal care tasks regarding moving & handling (assisting in standing & walking, handling a wheelchair) and medication (reminding a Member to take medication). Minor assistance with toilet and eating/drinking requirements also possibly fall into this category.

2. Not an advocate. A Volunteer is not expected to take on the role of an advocate, that is of someone who will stick up for a Member and help them to get their point across, obtain information and represent and speak on their behalf. Advocacy usually helps with areas such as Care, money, health, housing, family difficulties and voluntary services. It often involves attending official meetings with, for example, Social Work and its aims include safeguarding vulnerable people, helping people make informed choices and preventing the abuse of power.

If issues such as these arise, Volunteers should contact the Branch Co-ordinator. The normal course of action is for the Member to be referred to Borders Independent Advocacy Service (BIAS). BIAS run a Citizen Advocacy service under which Volunteers are trained and supported to act as advocates.

3. Not a person who takes a formal role as part of Person Centred Planning action plan. It has been agreed that it is acceptable for a Volunteer to, for example, attend meetings as part of a Member’s Circle of Support, reflecting their existing role as a Volunteer. However, if they take on a formal role as part of an action plan they do so as a private individual, supported possibly by, for example Social Work. This is because Interest Link is not equipped to support them in this role.

C. Boundaries to roles of others involved in the service

Most of this policy concentrates principally on the role of Volunteers in Interest Link. The boundaries to be observed by others (and the roles they need to perform) are touched on above and are looked at more fully here.

1. Members.

Interest Link Borders Boundaries Policy

- Members should treat Volunteers with respect.
 - They also have a duty to contact the Volunteer if they cannot keep an appointment and to let the Volunteer know if they wish to end the link. If they want the link to change substantially they should not pressure the Volunteer, but should make the suggestion through the Branch Co-ordinator.
 - They should not contact the Volunteer outside the occasions or times agreed with the Volunteer.
 - They must maintain confidentiality regarding the Volunteer.
2. Carers: In many cases the Member roles outlined above will be performed by the carer. In addition:
- The Carer must tell the Branch Co-ordinator during registration and at the Risk Assessment about any medical or behavioural issues on the part of the Member which might possibly affect the link and the Volunteer's role.
 - The carer should not ask the Volunteer to take on inappropriate roles, such as that of a Carer or Advocate.
 - Any suggestion that the Volunteer should take on minor care roles must be referred to the Branch Co-ordinator and formally agreed by all sides. The Carer should provide the necessary training if possible.
 - In any discussion of Person Centred Planning they should advise the Volunteer to consult with their Branch Co-ordinator on the issue.
 - They should ensure the rule of no overnight stays for 1:1 links and the presumption of no visits to the Volunteer's home are observed.
 - They must maintain confidentiality regarding the Volunteer
3. Branch Co-ordinators
- Must endeavour to find out all relevant information about any medical or behavioural issues on the part of the Member which might possibly affect the link and the Volunteer's role.
 - Must be candid about the reduced chances of making a link where the Member has severe disabilities, health or behavioural problems.
 - Must acquaint themselves with the policies of care providers that could affect the link, such as rules re carers accompanying Members outside a nursing home and the administration of medication away from a care setting.
 - Must address any requests for a change to the link from Member, carer or Volunteer.
 - Must provide adequate support and advice to Volunteers regarding their role and any boundaries issues that arise.
 - Must provide or obtain access to any training needed by the Volunteer in the performance of their role.

Boundaries checklist for Branch Co-ordinators

For every link check:

- Commitment given by Volunteer regarding time spent, activities done, and location of activities is clear and Volunteer is not being asked to take on tasks outside these commitments.
- Volunteer is not being asked to take on inappropriate roles such as Carer (particularly re moving & handling, epilepsy & medication) or Advocate.

Interest Link Borders Boundaries Policy

- If medical or personal care issues are involved, all parties are agreeable, the Volunteer has been given the appropriate training and the details of the tasks recorded in the risk assessment.
- Boundaries re visiting Volunteer's home, overnight stays and confidentiality been made clear to Volunteer.
- Any Member minor challenging behaviour made known to Volunteer
- Any Member habits, such as tendency to touch inappropriately, made known to Volunteer.
- Any other personal or organisational boundaries issues clarified.

Interest Link Borders Boundaries Policy