



Volunteer Manual: Befriending intervention for people with Learning Disability

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INTRODUCTION

Dear Volunteers,

Thank you for agreeing to take part in the study. We hope that the volunteering experience will be enjoyable for both you and the person you are matched with

This research project has been funded by the National Institute for Health Research. The aim of the study is to carry out a pilot trial of one to one befriending by volunteers in people with learning disability in order to collect data on recruitment and acceptability of the intervention. We would also like to assess the impact of befriending on individuals with learning disability as well as volunteers.

We have designed an experiment called a 'randomised controlled trial' whereby people with learning disability who have been matched with a volunteer befriender (intervention group) will be compared to people with learning disability who have not been matched with a befriender (control group). Individuals will be randomly allocated to either group.

We will be asking you and the person you will be befriending to complete questionnaires at the start, at 6 months and 12 months.

Your main role will be to provide companionship/ friendship to the person you have been matched with. You will meet them approximately once a week, for a period of six months. The aim of the meetings will be to support the individual to access activities in the community, but you may also decide to spend time together in the individual's home. It is hoped that with your input, the individual will be less socially isolated than before.

This handbook is intended to give you an overview of matters relating to your volunteering role as a befriender. It is not intended to be comprehensive. We encourage you to contact your Volunteer Coordinator if you have any queries or concerns. We look forward to working with you and thank you for giving up your free time to make a real difference in a service user's life

IMPORTANT CONTACT DETAILS

Volunteer Coordinator

Your first point of contact for any queries or problems regarding your volunteering experience will be

Name: _____

Mobile: _____

Office Tel: _____ ext: _____

[email:](#) _____

Research Assistant

You can also contact the research team if you have any questions related to the study.

Name: _____

Mobile: _____

Office Tel: _____ ext: _____

[email:](#) _____

Contact details for the befriending schemes taking part in the study:

The befriending scheme

Address:

1 the Croft, Sudbury, CO10 1HN

Telephone number:

01787 371 333

Hackney volunteering and befriending scheme

Address:

31 Waterson Street, London E2 8HT

Telephone:

0207 275 9829

YOUR ROLE AS A VOLUNTEER

Providing befriending to the individual with learning disability

Your main role as a volunteer will be to spend time with the individual you have been matched with, most likely in their home or the local community. Many individuals are vulnerable to social isolation and will appreciate having company. Your role will also be to help individuals access activities of interest in the community, as many people may find it difficult to travel on their own.

Listening to and communicating with people with learning disability

You may find that one of the most useful things you can do for the person you have been matched with is to listen to them. This is not to say that you should act as a counsellor or therapist, or give advice. However, simply giving the person chance to express themselves to a non-judgemental listener can be very therapeutic for them.

People with learning disability often have communication difficulties that may affect their ability to express themselves. Many people also find it difficult to understand complex information or jargon. It is important that you speak to the person using simple language and check with them to see that they have understood you. If you do not understand what the person has said, it is ok to ask them to repeat what they have said. Providing information in a visual way can also help the person to understand information and some individuals may need more time to reply to a question as they need time to process the information.

It will help to ask open questions i.e. questions that don't invite a 'yes' or 'no' answer. For example, "Do you like sports?" can be answered with a yes or a no, whereas "What sports do you like?" encourages a longer and possibly more meaningful answer. However, some people with learning disability may find it difficult to respond to open questions and giving a choice of answers may help (e.g. would you like to go bowling or watch football?)

It may also help to summarise or repeat back something that the person has said to show that you have been listening to them. Becoming comfortable with not talking to someone for short spaces of time is useful as well, in that it allows them the chance to think through what it is they are trying to say without feeling under pressure to produce an answer.

Participating in activities with the individual and engaging them with the local community

As you continue to gain the trust of your match, you should encourage them to participate in activities in their local community. The ultimate goal of the scheme is to help individuals become more integrated in society and gain a wider network of social contacts.

We will be here to support you with this. In accompaniment to this handbook, we will provide you with a booklet of activities that your match might like (and hopefully you as well!), which are available for free or very little money. You can also contact your Volunteer Coordinator if you are struggling to come up with ideas on how you and your match should spend your time together.

Going with the flow!

Over time we expect that you will start to build a strong rapport and trust with your match, and that your time together will become more spontaneous and natural. By the end of your time together, we hope that your match will find enough confidence and motivation to be able to engage in social activities without having to be supported by a volunteer.

You should bear in mind that every relationship will be different, and that some individuals may need more support than others. For example, some individuals might have difficulties engaging in social activities due to fear of crowded spaces or public transport. Your Volunteer Coordinator will brief you on any such issues, and support you in dealing with them.

Remember, your role as a volunteer is not intended to be...

- Babysitting
- Grocery shopping
- Attending medical appointments
- Cleaning/social care
- Mediating other relationships for the service user
- Taxi service
- Counsellor or therapist

KEY QUALITIES OF A VOLUNTEER

Empathy

- Being able to identify with and understand the feelings of the individual you have been matched with.
- Being sensitive to the particular needs of the person, and adapting your behaviour as appropriate.
- Being aware that some of your match's behaviours and attitudes might be very different to your own. Accepting your match for who they are without judging, whether or not you agree with them. Being kind to the person.



Communication

- Being able to adapt your communication style to the needs of your match, including the content, pace, timing and tone of your speech.
- Allowing the person plenty of time and space to express themselves to you.
- Showing that you are interested in what the person has to say.

Relationship building

- Gaining the acceptance and trust of the individual
- Being able to make the person feel comfortable and at ease.
- Showing willingness to change the way you do things and learn new skills when necessary, and being receptive to feedback.

Organisation

- Working with your match to plan future contact and meetings, and being respectful of their time.
- Being realistic about the time and commitment required by the role, without making promises that you will not be able to keep.
- Maintaining regular contact with the Volunteer Coordinator.

Motivation

- Showing full commitment in making a difference to the individual's life
- Continuing your participation even when it proves challenging or disappointing in some way.

Knowledge

- Having an interest in people with learning disability and the issues they may face

Being aware of your own mental health and any vulnerabilities with which you will need support during the befriending scheme

WHAT IS LEARNING DISABILITY?

Learning disability is a life-long condition characterised by reduced intellectual ability and difficulty carrying out daily living tasks. It arises in childhood (before the age of 18). There are a number of terms used to describe people with learning disability. In the past, derogatory terms such as mental retardation or mental handicap were used. Sometimes learning disability is also referred to as "intellectual disability", which is the preferred term in research and is used internationally.



1. Is learning disability the same as learning difficulty?

You may hear some people with learning disability describe themselves as having a learning difficulty. Sometimes these terms are used interchangeably by services but they are actually not the same thing. When someone has a learning difficulty, they have a specific deficit in one or two aspects of learning but their overall intelligence is not affected. An example is dyslexia, which is a difficulty in reading. Someone who has a learning disability has a "global impairment of intelligence", which means that many areas of intellectual functioning are affected, such as reading and writing, calculating, communicating, planning and organizing, reasoning and judgment and abstract thinking. These intellectual deficits affect the ability of the person to look after themselves.

2. What is mild, moderate or severe learning disability?

Learning disability is usually categorised into different levels of severity. Someone with mild learning disability may be able to read and write to a basic level. They may have reasonably good communication skills and comprehension but will struggle to understand complex information and technical words or jargon. They may be independent in many areas of daily living such as managing their

self care and personal hygiene, cooking simple meals and travelling on their own in the community but may have difficulty budgeting and managing their finances and reading letters and completing application forms. Some individuals may be able to work with support and mentoring such as within a cafe or supermarket. Some individuals may attend courses at college that are specifically for people with learning disability.

Someone with a moderate learning disability will usually communicate using short sentences and their ability to understand information will be more limited. They usually require help and support in a number of areas of daily living such as self care, preparing meals, household chores and travelling in the community. Some individuals with moderate learning may go to courses at a college or may attend a day centre.

Individuals with severe learning disability have very limited communication skills and may be non verbal or only communicate using single words. Their comprehension is also very limited and they may only understand simple instructions or may need to see objects in order to understand what is happening, for example, showing the person their shoes or jacket may be used to indicate that they are going out. Some individuals may communicate using Makaton, which is a simplified form of sign language.

As a volunteer in this study, you will be matched

to someone with a mild or moderate learning disability.

What issues do people with learning disability face?

1. Physical health problems

People with learning disability are more likely to experience physical health problems than the general population, such as epilepsy and respiratory problems. They are more likely to have hearing and visual problems. However, they may experience difficulties accessing to appropriate health care. This may be because they themselves or their carers are not able to recognise or communicate physical symptoms or because health care professionals do not always recognise that the person may be suffering from a physical health problem and attribute the behaviour to the person's learning disability. This is known as diagnostic overshadowing. Health services such as GP practices and hospitals are required by law to provide "reasonable adjustments" in order to ensure that people with learning disability and other disabilities can obtain access to care. This may involve providing information in easy read/accessible language or providing longer appointments. People with learning disability also have access to annual health checks at GP practices, which is aimed at increasing the detection of physical health problems.

2. Mental health problems

People with learning disability are more likely to experience certain types of mental health problems such as anxiety disorders and psychosis/ schizophrenia. They are also more likely to have autism. Autism is a condition that arises during the early years of development and is associated with deficits in social interaction and communication and individuals have repetitive interests and behaviour. Individuals with both learning disability and autism may show reduced eye contact, have difficulty initiating conversation or responding appropriately to conversation, show unusual

interest in certain things or people and may become anxious or upset when there are changes in routines. If you are matched with someone with autism, be mindful that they may have particular interests that they would like to pursue and they may be less willing to consider alternative activities, and be aware that you may need you to stick to a particular time and day when you are befriending them.

3. Discrimination and stigma

People with learning disability often report that they have been bullied because of their learning disability. Hate crimes against people with learning disability have been increasing. These experiences can have a significant impact on self esteem and well being and may lead to people refusing to go out due to fear of being attacked or abused.

4. Limited social networks

People with learning disability often have few friends or no friends at all and have few opportunities to talk to someone outside of their home environment. As a result, many people report feeling lonely and isolated. They may rely on their carers to help them access the community and some people may not have many opportunities to pursue activities that they are interested in. Therefore having a befriender could make a real difference to the lives of these individuals.

YOUR DUTY OF CONFIDENTIALITY



During your work as a volunteer, you will inevitably learn sensitive details about the life and medical history of the individual you have been matched with.

It is vital that you respect your match's privacy by keeping this and any other sensitive information you learn confidential, i.e. that you do not share this information with

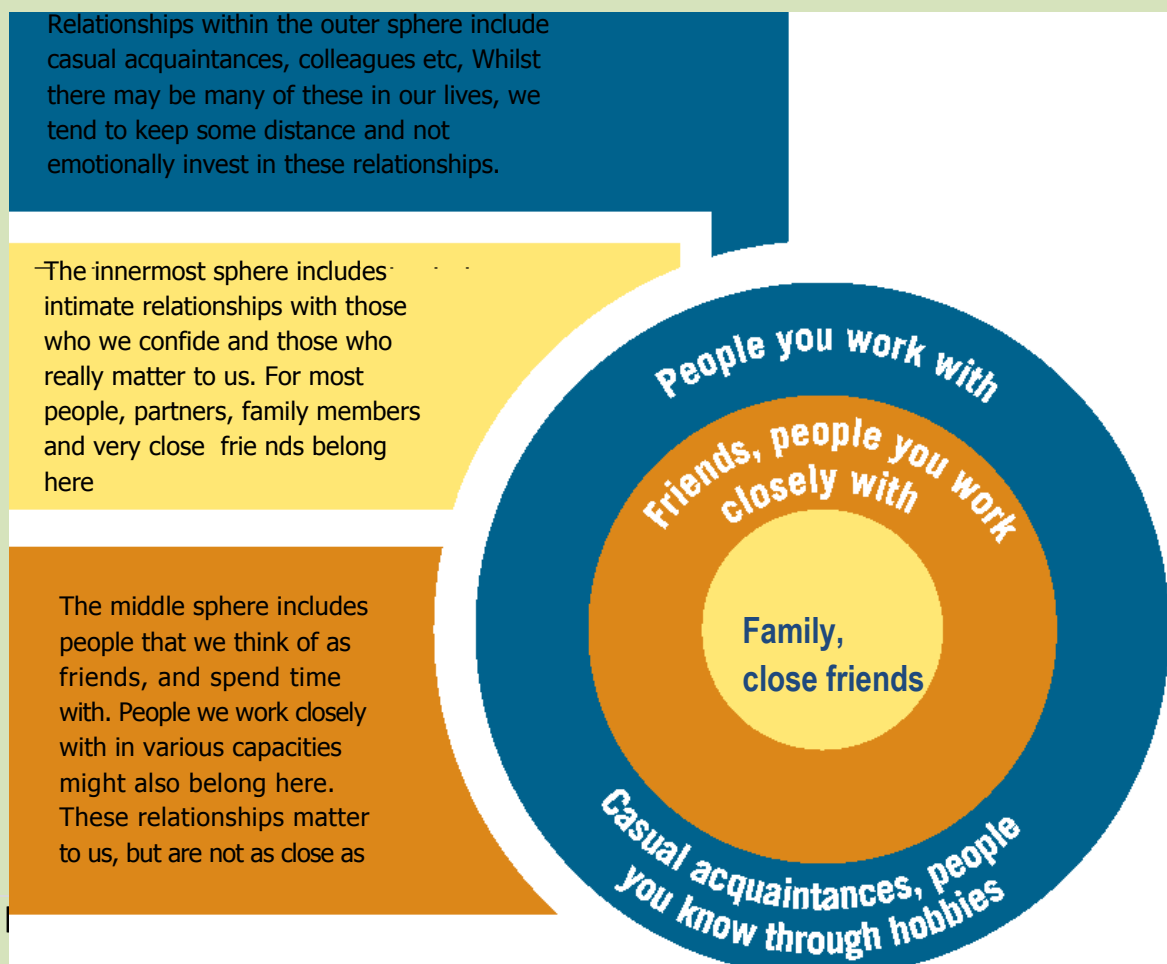
anyone outside of the study. This includes disclosing the individual's full name, address, telephone number, diagnosis, or any other details about them to anyone else. You must also respect the confidentiality of the individual's carers, family members, friends and others you encounter in your role as a befriender to the individual. Bear in mind that your duty of confidentiality applies both during the study and after your participation has ended. Any unauthorised disclosure of information will be treated as misconduct and will result in immediate termination of your participation in the study. Remember – most breaches of confidentiality arise from carelessness.

The only time you may break confidentiality is if you learn something that makes you concerned about the safety of yourself, the individual, or someone else. In this situation, you should try to discuss the issue with the volunteer coordinator if possible.

ESTABLISHING BOUNDARIES

The individual with whom you are being matched is likely to be very socially isolated, with very few friends or family members around them. This might be very different to your own social situation. You are likely to have a number of people around you, some of them closer than others, as illustrated in the diagram below. By contrast, your match may not have anyone at all. This may mean that your match will have different expectations than you regarding your relationship.

For example, you may find that the individual you are matched with considers you a very important and close person (i.e. belonging to the innermost sphere in the diagram below), while you consider them to be in your middle or outer sphere. It is important to be aware of this potential disparity, and to establish boundaries that you are comfortable with while being sensitive to your match. Described on the next page are some issues with these boundaries that may arise, and how you should approach them.



Lending or handling money

The person you are matched with will be informed that volunteer befrienders do not get involved in financial issues. However, on occasion, this may occur; for example, if your match forgets their money for an activity and you agree to cover them. Yet, you should not feel that you have to lend your match money, or become involved in handling their money. If you feel uncomfortable with lending money, you should inform the person that the guidelines on lending or handling money is that this is not part of your role and as such you should avoid it.



You should also be mindful of the cost of activities when planning meetings with the service user – some activities will not be appropriate to their financial situation. Even inexpensive activities, such as meeting for coffee, may become an issue if they occur too frequently.



Accepting gifts

The individual may wish to exchange gifts around birthdays or at Christmas. Please feel free to do so if you find this acceptable – within reason. Exchange expensive gifts or multiple gifts may not be appropriate and may result in the individual, or people close to them, feeling obliged to return the favour.

It may be preferable to suggest that you both do some special activity together, rather than giving each other gifts. If

you do exchange gifts, limit these to small tokens. Where it would obviously be inappropriate to accept a gift (e.g. very expensive gifts, items belonging to the family of the person), you should inform the person that your participation in the study does not allow you to accept such gifts.

Legal involvement

In rare cases, your match may ask you to become involved in legal issues. We strongly advise you not to talk about these sensitive issues, such as next of kin, power of attorney or inclusion as a beneficiary in the person's will.

If such a discussion does arise, you must not under any circumstances agree to become next of kin, take power of attorney, or become an appointee in legally binding contracts with your match or their family while participating in the study. You should not be included as a beneficiary in the person's will and must not be witness to or executor of their will.

Personal or private information

Sometimes your match may want to tell you something private and ask that this information not be passed on to their care team or anyone else. However, this information could indicate that they are unwell, or that they are causing harm to themselves or someone else. You should advise your match in advance that you cannot guarantee that you will keep the information between the two of you, as you have an obligation to pass on certain information to the Volunteer Coordinator. The individual would have been made aware of this obligation prior to being matched with you, and this will be reiterated in the first meeting between the two of you, which will be facilitated by the Volunteer Coordinator. You may reassure the individual that you will only tell the Volunteer Coordinator, and no one else.

Physical contact

As your relationship develops, it may become a genuine friendship. Accordingly, friends may demonstrate affection through physical contact – hugging, kissing on the cheek, or patting one’s arm or shoulder etc. We suggest that you only engage in physical contact if you both feel comfortable. You should be clear about your boundaries with the individual if you do not wish to engage in physical contact. You should not be the one to initiate physical contact, and should be mindful of the person’s vulnerability and potential cultural issues surrounding physical contact. We suggest that you exercise ‘common sense’, e.g. if your match becomes distressed and you are still getting to know one another, you might pat their shoulder in a reassuring manner, but shouldn’t attempt to hug them. However, any physical contact depends on the situation, so please be mindful of ambiguity of when physical contact may and may not be appropriate.

Visiting the individual’s home

You are likely to meet your match in their home. Your role is to spend time with the person first and foremost, and at times they may not wish to leave the house. When you visit their home, please act in a courteous and respectful way to the individual and any other people you encounter when visiting. We will have made sure that there are no hazards in the person’s home; however, please let the Volunteer Coordinator know if you have any concerns about risk.

Relationships

Given that your match is likely to consider you to be part of their inner circle, as described on a previous page, there is the possibility that they may form an inappropriate attachment to you. Please contact the Volunteer Coordinator if this issue arises. It is not appropriate to have a romantic relationship with the individual while volunteering. It is also possible that your match may ask you to be involved in their personal relationships (e.g., pick their child up from school, ask you to speak to their ex-partner). It is not part of your role as a befriender to become involved in their personal relationships, and you should feel free to state this clearly and firmly to them, referring to the boundaries that will have been set by yourself and the Volunteer Coordinator during your first meeting with them. Contact the Volunteer Coordinator if you have any concerns.

Managing mental health or behavioural issues that may arise

While volunteering, it is possible that the mental health of the person you are matched with may deteriorate. Not everyone with learning disability will have mental health problems. Some individuals may present with “challenging behaviour”. If you are concerned about the person’s safety, you have a duty to contact the Volunteer Coordinator as soon as possible to discuss your concerns. Below are some ways in which the individual’s mental health might deteriorate, and some guidelines on how to deal with them.



Managing challenging behaviour

Challenging behaviour is a term used to describe behavioural problems that a person with learning disability may present with such as verbal or physical aggression (e.g. hitting, kicking and damaging to property) or self injury (e.g. head banging or biting oneself). Behavioural problems often occur when the person has difficulty communicating their needs or their needs are not being met in some way. There are other reasons why behavioural problems may occur:

- Physical illness or pain e.g. constipation, infection
- Lack of stimulation, boredom
- As a way of escaping or avoiding a situation (e.g. having to complete certain tasks)
- As a way of obtaining something tangible such as a particular item or food
- Mental health problems such as depression or anxiety

Most people with learning disability do not present with behavioural problems. If the person is known to have had behavioural problems in the past, this will be discussed with you including what to do if behavioural problems occur. You will not be matched to anyone with behavioural problems that may put you at risk.

There may be some indicators or signs that the person is not happy and could lead to them becoming angry or aggressive. For example, if the person is not interested in going out or is irritable or more anxious than usual. In this situation, it may be better to suggest spending some time together in the person’s home rather than going out, or asking their carer for their advice. You may need to cut your visit short. If you are in the community, and you start to notice that the person is becoming tired or irritable, you should consider returning the individual to their home as soon as possible.

If you are concerned that the person may become physically aggressive, or is physically aggressive towards you in the community, you should return the person home if it is safe to do so. You may need to call their carer for help and support. If you are concerned about your safety, you may need to call the police, although such situations are likely to be uncommon. You should discuss these situations as soon as you can with the volunteer coordinator as a decision will need to be made about whether the relationship is safe to continue.



Panic attack



Your match may not be used to spending long periods of time in public so there is a small chance of them having a panic attack while out in the community with you. It is important to be aware of indicators of a panic attack:

- The person may begin to sweat profusely, or complain of feeling too hot or too cold, or of being sick.
- The person may feel dizzy or faint, start to tremble, become unsteady on their feet or need to sit down.
- The person may feel that they cannot breathe or that they are choking.
- The person may become more aware of their heart beating, have chest pains, or believe that they are having a heart attack and/or that they are going to die.
- The person may feel that they are not real or that they are not connected with their surroundings.
- The person may feel that they are losing control.

A person having a panic attack will have several of these symptoms at the same time. In the event of your match having a panic attack, follow these steps:

1. Create a safe, stable environment. Move the person to a quiet place where they can sit down if possible. Try not to attract the attention of others but enlist the help of one other person if need be.
2. Help the person with their breathing. Help to calm the person by encouraging slow,

relaxed breathing in time with your own breathing. Encourage them to breathe in for three seconds, hold for three seconds and then breathe out for three seconds.

3. Reassure the person. Gently tell them that they are experiencing a panic attack that will soon pass, and not something more adverse such as a heart attack. Let them know that you will stay by their side and ensure that they are safe until the attack is over.

Psychotic Episode

Some people with learning disability may have mental health problems such as schizophrenia (also known as psychosis or psychotic episode) where they may hear voices or be paranoid about others. In the event that the individual has a psychotic episode while you are with them, we suggest you follow the steps outlined below:

1. Create a calmer environment. The person may feel agitated by the environment. There are a number of things that you can do to make your surroundings less stimulating.
 - Try to talk slowly, using a gentle but firm tone of voice and simple language. If there are things in the room that are distracting, like a noisy radio, television or ringing phone, turn them off or remove them.
 - It may be appropriate to refrain from talking altogether for a few moments if conversing is clearly stressful for the person.
 - Sit near to them but not so close that they might feel you are invading their personal space.
 - Ask the person if they would like a drink or something to eat.
 - Don't stare at them directly or insist they make eye contact, as this may feel threatening for them.
2. Be patient and non-judgemental. If the person is hearing voices or having persecutory delusions, these may feel very

real, and very frightening. Rather than challenging these experiences, or trying to get to the person to 'snap out of it', show them that you are trying to understand what they are thinking or how they are feeling. Don't pretend that you can see or hear anything that you cannot. Where possible, attempt to get them to talk to you about something more neutral. Try not to become angry, frustrated or critical.

3. Provide help. Tell the person explicitly that you want to help them. It is fine to tell them that you may not know the best way, but that you will do your best. Ask what help is needed. Responding to reasonable requests will help the person to feel less out of control in the situation. Do not promise things that you cannot deliver, such as agreeing not to tell the Volunteer Coordinator about a worrying incident involving the service user.
4. Encourage the person to seek appropriate professional help. Tell your match that you are concerned about them and encourage them to call their care team. Outside of office hours (Monday to Friday, 09.00 – 17.00), encourage them to call the relevant Out of Hours Service . You may also call this line yourself to seek advice, during and outside office hours. If you are concerned for the safety of the service user, you should bring them to A&E if possible, or call the emergency services. In the event of the person becoming aggressive or threatening, you should leave the service user and only then call emergency services.
3. Contact the volunteer coordinator or another member of staff at the befriending scheme. Always contact them to let them know about any concerning incident involving your match.

Suicide risk

In the event of your match harming themselves or attempting suicide, you should call emergency services immediately. However, be assured that this is an unlikely occurrence. What might be less unusual is your volunteer seeming depressed or

talking about harming themselves. In this event, follow these steps:

1. Ask the person how they are feeling. What is making them feel this way? Do they feel hopeless? Give them the opportunity to offload and express their feelings without judging them, or challenging their negative evaluation of their situation.
2. Remind them of your duty of care. Tell the patient that you want to be a good listener to them and that they can tell you anything, but also that their safety is paramount; if this is at risk, you will inform the Volunteer Coordinator in the interest of their well-being.
3. Assess risk. Don't be afraid to ask explicitly if the person is having thoughts of suicide. It is not the case that this question will encourage suicidal behaviour. Asking this question without signs of hesitation will indicate to the person that you are calm, supportive and capable of listening to them in their time of distress. It may be a huge relief to the person to have the opportunity to discuss any suicidal feelings, which is often a taboo topic. If they are experiencing thoughts of suicide, explore this further to determine how high the risk is. For example, do they have a plan? Have they made preparations to carry the plan out e.g. collecting pills, buying equipment?
4. Show your support. Remind the person that you are there because you care about them. They are valuable, and others care about and value them too. Tell them that you don't wish to leave them in a vulnerable position and would prefer to seek professional help. Encourage them to contact their care team, or the relevant Out of Hours Service. If the risk of suicide is high, call the emergency services. Try not to leave until help is in place.
5. Contact the volunteer coordinator at the befriending service. Always contact them to inform them about any concerning incident involving your match.

SAFEGUARDING VULNERABLE ADULTS



People with learning disability, especially those who have few friends or relatives, are more vulnerable to abuse than the general population. As a volunteer befriender, you have a duty to report abuse to the Volunteer Coordinator. There are several types of abuse of which you should be aware, as described below.

Neglect

The persistent failure by a designated responsible person to meet another person's basic physical and/or psychological needs, likely to result in serious impairment of their health and personal development. Such neglect may include failure to:

- meet basic emotional needs,
- protect the person from physical or emotional harm or danger,
- provide adequate supervision,
- ensure appropriate medical treatment
- ensure access to clothing, food and shelter.

Emotional abuse

The Persistent emotional ill-treatment causing severe and persistent adverse effects on a person's psychological well-being. Such neglect may include:

- conveying to a person that they are worthless, unloved or inadequate
- depriving an individual of the rights to choice, information, privacy or respect
- threatening or intimidating a person, causing them to feel frightened or in danger
- shouting, swearing, insulting, humiliation

- enforced isolation, confinement or locking someone in; denying a person access to stimulation
- behaviour that may be perceived as bullying (including cyber-bullying).

Physical abuse

The use of force resulting in pain or injury, or a change in the person's natural physical state. Obvious forms of such neglect include hitting, shaking, throwing objects at the person, or burning or scalding them. Less obvious forms of physical neglect may include excessive restraint, force-feeding, enforced sedation, unnecessary interventions (e.g. catheterisation) for 'ease of management', deliberately inducing illness, suffocation, poisoning or drowning.

Sexual abuse

The forcing or enticing of a person to take part in sexual activities to meet the perpetrator's needs, not necessarily involving a high level of violence, whether or not the person is aware of what is happening. Often such abuse is physical, including:

- penetrative acts, including use of objects for penetration
- non-penetrative acts e.g. masturbation, kissing, rubbing and touching outside of clothing
- involvement in sexual activities/relationships to which a person has not consented

- sexual activity between an individual in a position of responsibility (e.g. a volunteer befriender) and a vulnerable adult.

There may also be 'non-contact' instances of abuse, including:

- forcing people to watch sexual activities or images
- encouraging people to behave in sexually inappropriate ways
- grooming in preparation for abuse.

Financial abuse

The use of a person's property, assets, or income without their informed consent or making financial transactions that they do not comprehend (unless financially sanctioned). This may include:

- Stealing, misappropriation of money or fraud
- Depriving another person of their money or benefits
- Using pressure to obtain money or rights to assets of value
- Inducing a person to pay for goods or services on behalf of the recipient.

Institutional abuse

Mistreatment of service users within care settings involving inadequate care of support, or poor practice. This may include:

- undue restraint due to staff shortages (e.g. use of harnesses, use of sedatives/other drugs, withholding drugs)
- lack of reasonable choice about matters concerning the service user
- denial of privacy

placing undue pressure on a service user to agree to something.

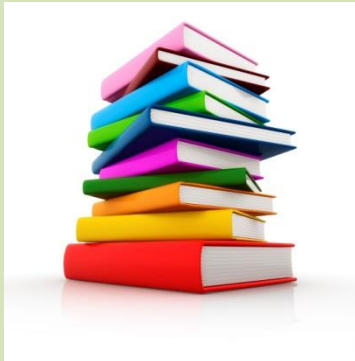
LONE WORKING IN THE COMMUNITY



Your role as a volunteer will result in you working on your own in the community. It is important that you are aware of the risks associated with lone working, and how these risks can be minimised.

- In the majority of cases, you will meet your match in their home, at least for your first few meetings. The befriending service will have conducted a thorough risk assessment of the individual's home and deemed it a safe environment in which to meet. You will be made aware of any noteworthy matters, such as whether your match keeps pets, whether they smoke, whether they live with others, etc. Most individuals with learning disability will be living at home with family or in supported living or residential placements where there will be carers available for support, if needed.
- Ensure that someone always knows where you are (e.g. partner, friend) and agree on a time by which they should expect to hear from you after meeting your match. Always inform them if your plans change. (Be mindful of not breaking patient confidentiality, especially when meeting your match at their home. You should not tell anybody the full name of the person or the house number, but you may tell them the street name or the wider area. If you become at risk during the meeting, you may break this confidentiality when seeking urgent help.) You may find it useful to establish an emergency code word with that person, which will alert them to the fact that you are in danger.
- Keep the number of your Volunteer Coordinator in your phonebook, as well as the number of the person monitoring your whereabouts. In the unlikely event that your match is hostile towards you when answering the door to their home, do not go in. You may tell them that you cannot stay due to personal reasons, but that you are doing them the courtesy of telling them in person.
- Remember to respect the person's home. You are their guest; if they feel that you are being disrespectful or invasive, this may lead to hostility.
- As you get to know your match, try to recognise the signs of them becoming unwell. Terminate the meeting early if you are concerned about your safety, and always contact the Volunteer Coordinator afterwards to raise your concerns. Do not meet the individual again until the Volunteer Coordinator has reviewed the situation and deemed it safe to continue providing befriending.
- Your safety is paramount. You will not be matched with anyone who is presenting with behaviour that could put you at risk

USEFUL RESOURCES



Websites

1. British Institute for Learning Disabilities

www.bild.org.uk

2. Foundation for People with Learning Disabilities

<https://www.mentalhealth.org.uk/learning-disabilities>

3. CHANGE

www.changepeople.co.uk

4. Mencap

www.mencap.org.uk

5. Down's Syndrome Association

<http://www.downs-syndrome.org.uk/>

6. The National Autistic Society

www.autism.org.uk

7. Autism in Mind

www.autism-in-mind.co.uk

Communicating with people with learning disability

1. Guide to communicating with people with learning disability, produced by Mencap

https://www.mencap.org.uk/sites/default/files/2016-12/Communicating%20with%20people_updated%20%281%29.pdf

2. Information sheet on communication and challenging behaviour produced by the challenging behaviour foundation

<http://www.challengingbehaviour.org.uk/learning-disability-files/04---Communication-Information-sheet-web.pdf>

Making information easy read/accessible

- 1.CHANGE provides a guide on how to make information accessible

<http://www.changepeople.org/Change/media/Change-Media-Library/Free%20Resources/How-to-make-info-accessible-guide-2016-Final.pdf>

2. Website on how to make information accessible and tools to make your own accessible information.

<http://www.accessibleinfo.co.uk/>

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