

THE BYTES PROJECT



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The Bytes Project

CHILD AND VULNERABLE ADULT PROTECTION POLICY

CHILD AND VULNERABLE ADULT PROTECTION POLICY

1.1 Policy Statement

The Bytes Project is committed to the provision of services which support the care, welfare, and safety of clients. The Board, staff and volunteers of this organisation recognise their responsibilities to develop awareness of the issues which can cause harm and act appropriately in respect of these.

1.2 Principles of Practice

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The Bytes Project recognises a duty of care to children and adults at risk of harm and is committed to ensuring that children, young people, and adults are safeguarded as effectively as possible through the practice of the following principles:

- Adhering to this safeguarding policy. This policy provides a code of behaviour for staff and volunteers.
- Sharing relevant information and good practice in safeguarding child and adults with service users, parents, staff, and volunteers as appropriate and necessary.
- Sharing information about concerns with the agencies who need to know and involving relevant parties appropriately.
- The Bytes Project will take seriously all allegations of abusive behaviour and/or practice, reports of concern and allegations of there being a risk of harm in all forms, and will respond to such allegations quickly
- Carefully following the procedures for recruitment of staff and volunteers. The Bytes Project uses the Access NI Pre-employment check for all current and future posts. Staff are required under contract to inform The Bytes Project of any relevant change in their circumstances.
- Providing effective management and clinical support for staff and volunteers through supervision, regular meetings, and training.
- Reviewing this policy and good practice guidelines every three years and in light of changing circumstances and service needs.
- In accordance with best practice all members of staff will complete training in Safeguarding Children and Adults every 2, maximum 3, years to ensure that they remain fully aware of the procedures herein and the signs and indicators of potential harm.

1.3 Principles of Safeguarding

Safeguarding encompasses **promoting** the welfare of children, young people, and adults, **preventing** harm through early identification of risk, and **protecting** children, young people and adults from harm when required.

Safeguarding responsibility in Northern Ireland ultimately lies with the Health and Social Care Board and Trusts in partnership with the PSNI. Other responsible bodies are the Safeguarding Board for Northern Ireland (SBNI), and the NI Adult Safeguarding Partnership (NIASP).

This safeguarding policy applies to children, young people, and adults at risk of harm.

1.4 Definitions:

A child is anyone under the age of 18.

Child in Need: a child is considered to be 'in need' if:

- He is unlikely to achieve or maintain a reasonable standard of health or development without the provision for him of services.
- His health or development is likely to be significantly impaired without the provisions of such services.
- He is disabled.

Child in Need of Protection: a child who is at risk of, or likely to suffer, significant harm.

Adult at risk of harm: A person aged 18 or over whose exposure to harm through abuse, exploitation or neglect may be increased by their personal characteristics and/or life circumstances. Personal characteristics may include but are not limited to: age, disability, special educational needs, physical or mental illness, physical or mental frailty or impairment of or disturbance in the functioning of the mind or brain, addiction, dependency on others in the performance of physical functions, impairment in the ability to communicate with others. Life circumstances may include but are not limited to isolation, socio-economic factors, and environmental living conditions.

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An **Adult in need of protection** is the above plus a person who is unable to protect their own wellbeing, property, assets, rights, or other interests, and where the action or inaction of another person or persons is causing or is likely to cause him/her to be harmed.

Definition of Harm: The Children's Order defines 'harm' as ill-treatment or the impairment of health or development. This can be both physical and non-physical and affect physical and mental health and physical, intellectual, emotional, social, or behavioural development. Harm can be the result of action or inaction (omission) and can deliberate or as the result of lack of knowledge or awareness. There is no absolute definition of 'significant harm'; this is assessed on a case-by-case basis by the relevant HSCT.

Definitions of Abuse:

Abuse is a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to another individual or violates their human or civil rights. It may be perpetrated by a wide range of people, including those usually close to an individual.

There are five types of abuse defined in the DHSSPS guidance "Co-operating to Safeguard Children and Young People in Northern Ireland" (March 2016) as follows:

Physical abuse: is deliberately physically hurting a child or vulnerable adult (including inappropriate restraint or use of medication), by either an adult or another child.

Emotional Abuse: the persistent emotional maltreatment of a person. It is also sometimes called psychological abuse, and it can have severe and persistent adverse effects on a child's or vulnerable adults emotional development. Emotional abuse may involve bullying, including through social networks. Behaviour that inflicts mental distress by threat, humiliation, or other verbal/non-verbal conduct.

Sexual Abuse: occurs when others use and exploit children or vulnerable adults for their own gratification or gain or the gratification of others. It may involve physical contact or not, forcing children or vulnerable adults to look at sexual images or activities, encouraging children or vulnerable adults to behave in sexually inappropriate ways or grooming. Sexual abuse can be perpetrated by men, women, and other children, and by strangers or people known to a child or vulnerable adult which will affect them physically, emotionally, and socially. Adults – any behaviour perceived to be of a sexual nature which is unwanted or takes place without consent or understanding.

Neglect and omission: are the failure to provide for a person's basic needs or depriving them of physical or emotional support.

Exploitation: the intentional ill-treatment, manipulation or abuse of power and control over a child, young person, or vulnerable adult, to take selfish or unfair advantage of a child, young person or vulnerable adult for personal gain.

In addition, the DHSSPS document on "Adult Safeguarding – Prevention and Protection in Partnership" (July 2015) further defines:

Financial abuse: actual or attempted theft, fraud or burglary, the misappropriation or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion, or deception.

Institutional abuse: the mistreatment or neglect of an adult by a regime or individuals in settings which adults who may be at risk reside in or use.

1.5 Code of conduct for The Bytes Project

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The Bytes Project has zero-tolerance of abuse wherever it occurs or whoever is responsible. In relation to safeguarding, all employees working for The Bytes Project must adhere to the following:

1. Staff need to be aware of circumstances that may leave a person vulnerable to harm and be able to recognise the possible signs of abuse. They should be alert to the demeanour and behaviour of service users and those around them and changes that may indicate that something is wrong.
2. Keep physical contact to an absolute minimum.
3. Any behaviour, physical or non-physical, verbal, or non-verbal, which could be deemed as questionable by an outside observer must be avoided.
4. If a service user seeks physical contact, consult with staff members or person responsible in an open manner and follow the behavioural protocol in place for this in venues at all times.
5. Any injury or illness of a service user before, during or after a session must be reported and noted in the client file.
6. The Bytes Project staff must never:
 - take service users alone on car journeys, however short, or take service users to their own home.
 - Meet a client or have any contact with a client outside of the sessional context, either in person or via phone, email, or social media. If an employee meets a client in public accidentally the encounter should be kept to the minimum required so as not to cause offence. The employee should wait for the client to acknowledge them first, recognising their right not to be outside of the confidential work setting.
 - Do anything of a personal nature (e.g., personal care) for a service user that they can either do for themselves or that someone with the appropriate duty of care should undertake.
7. If a child/vulnerable adult misunderstands or misinterprets something an employee has done, this should be reported to a colleague and the person with managerial responsibility in that venue. The incident must then be immediately reported to their Line Manager. These actions must then be supported with a full written report of the incident to the Line Manager within 48 hours.

1.6 Staff Procedures

Procedures to be undertaken when risk of harm is alleged or suspected.

Suspicion or an allegation of risk of harm or abuse may arise through one of the following sources:

- (i) An individual's own observations including physical indication and/or behavioural indicators.
- (ii) An observation of a parent/carer/staff/volunteer about something he/she has seen or heard.
- (iii) An oral report from another member of staff within The Bytes Project.
- (iv) A disclosure from a service user about alleged abuse against him/her or another person.
- (v) A request by a service venue that the service user is observed as there is concern that they may be exhibiting behaviours or present with physical indicators.

Staff must act promptly on any suspicion they have that a child or adult may be at risk of harm or abuse, as well as any disclosure or allegation made directly. If staff are in any doubt whatsoever as to whether a Report of Concern should be made, they should consult with their Line Manager and/or with parents, carers, staff members or keyworkers in venues provided that they are not directly involved in the concern itself.

How to respond to Disclosure

In cases where a service user discloses abuse or risk of harm to a staff member or volunteer, they should adhere to the following guidelines:

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- Staff will not respond except for clarification. Comments or leading questions could affect the quality of any report and indeed hinder official investigations.
- Checking out - there may need to be some initial 'checking out' with the person who has disclosed information to you in order to ensure his/her safety. For example, if a staff member notices a bruise on a person's arm, it would be appropriate to ask, 'How did that happen?' However, be careful not to start investigating.
- It is important that staff understand the clear distinction between 'checking out' and an investigation. Staff should **not begin to investigate alleged or suspected abuse** by asking questions that relate to the detail, or circumstances of the alleged abuse, beyond initial listening, expressing concern and checking out.
- Staff will reassure the person who is disclosing information that he/she is doing the correct thing in telling, especially if that person is the child/adult affected.
- Staff cannot and will not promise to keep the information secret but will assure the person that only those who need to know will be informed.
- Staff will record in writing (date and sign your report) and ensure that the information is shared with the designated person within the unit concerned and within The Bytes Project at the earliest possible time (see below).
- If urgent medical/police help is required, call the emergency services.

Do

- Stay calm.
- Listen and hear.
- Express concern and sympathy about what has happened.
- Let the person know that the information will be taken seriously and give information about what will happen next.
- Ensure the safety of the person.
- Be aware that medical and forensic evidence might be needed.
- Act without delay.

Do not

- Stop someone disclosing to you.
- Promise to keep secrets.
- Press the person for more details or make them repeat the story.
- Gossip about the disclosure or pass on the information to anyone who does not have a legitimate need to know.
- Contact the alleged abuser.
- Attempt to investigate yourself.
- Leave details of your concerns on a voicemail or by email. If necessary, you should state that you need to speak to someone urgently about a Report of Concern.

There may be emergency situations where it is appropriate to contact the police immediately. This should be the responsibility of the service venue, but The Bytes Project staff should check that they have been contacted.

Whatever the circumstances of the concern, disclosure, allegation, or suspicion, it is vital that the staff member records the details and reports to their manager and to the service venue without delay. It is essential that all concerns, disclosures, allegations, and suspicions are recorded.

1.7 Recording and Reporting Concerns Guidance

- 1.7.1 An accurate record should be made in the notes of the date and time that the member of staff/volunteer became aware of the concerns, the parties who were involved, and any action taken, for example, if first aid was administered. Any questions that staff/volunteers ask in 'checking out' the concerns should also be recorded verbatim.

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- 1.7.2 The record should be clear and factual, since any information you have may be valuable to professionals investigating the incident and may at some time in the future be used as evidence in court. This kind of information should always be kept in a secure place (including electronic filing) and shared only with those who need to know about the concerns, disclosures, allegations, or suspicions of abuse.
- 1.7.3 It is also good practice for staff/volunteers to record in the notes the fact that they made a report, on what date and to whom the report was made.

1.8 Procedures to be undertaken when reporting concerns

Designated Person

Any concern, suspicion, allegation, or disclosure should be brought to the designated member of staff in the unit concerned (unless this person is the subject of a complaint), as this facility holds the primary duty of care, **and also to** the *designated officer in The Bytes Project.

Within The Bytes Project, **Charlene Cowan (Belfast) and Hannah Wylie, Edel Saunders and Aiden Quigley (Derry) is the Designated Officer. If he/she is not available or is the subject of the complaint, the employee should contact one of the Senior Project Managers.*

The Report of Concern procedure is as follows:

- (i) Concerns or suspicions are reported to the designated person in a service venue and to the designated person in The Bytes Project.
- (ii) Details are to be written down as soon as possible and be given to the designated person at The Bytes Project.
- (iii) The confidential report will be kept by the designated person at The Bytes Project, and they will contact the unit and agencies with a statutory function for investigation.
- (iv) **Within two days**, the designated person will acknowledge, in writing, the receipt of the Report. A copy will be kept on file.
- (v) **Within two weeks** of the receipt of the initial report, the designated person will report in writing as to the proposed steps to be taken. A copy will be kept on file.
- (vi) **Within one month** of the receipt of the initial report, the designated person will report in writing as to the steps that have been taken. A copy will be kept on file.
- (vii) If such communication is not received from the designated person, the original signatory should make renewed contact. This to be recorded.
- (viii) If the original signatory is not satisfied with what has been done, he/she has the right to take their complaint directly to one of the statutory agencies.

1.9 Procedures to be undertaken by a member of staff within The Bytes Project if a complaint is made against him/her

- (a) The member of staff is required to report the allegation without delay to the Director.
- (b) The Director will produce a written report of the alleged incident.
- (c) This report will then be submitted immediately to the Chair of the Board, or in his/her absence, to the Secretary of the Board.
- (d) In the case of a formal allegation against a member of staff, the Board will decide whether the said member should be suspended with pay as a precautionary measure. This will not be automatic, and depending on the circumstances of the case, some preliminary investigation by Social Services and/or the police may be necessary before a decision will be properly taken to suspend, even as a precautionary measure. The appendix to staff contracts, concerning gross misconduct, should be read in conjunction with this policy.
- (e) The member of staff concerned will be advised in writing of the nature of the allegation and the Board's decision and the reason for any precautionary suspension and will also be advised to seek professional help before making any form of response. The right of the member of staff to consult with your representative will always be respected
- (f) The person making the complaint will be informed immediately, in writing, of the decision of The Bytes Project's Board.

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- (g) The Board will then as appropriate and in association with the relevant statutory agencies, take forward the investigation of the alleged incident(s).
- (h) The Bytes Project has the responsibility to monitor and review the above procedures.

Staff members who fail to comply with this policy will be subject to The Bytes Project's disciplinary procedure.

ADDENDUM - FOR RECRUITMENT AND SELECTION GUIDELINES ON THE EMPLOYMENT OF STAFF AND PARTNER ORGANISATIONS WHO HAVE SUBSTANTIAL ACCESS TO CHILDREN AND VULNERABLE ADULTS.

1. INTRODUCTION

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1.1 All job vacancies are advertised and all applicant's complete application forms with references sought for successful applicants. Arrangements are in place for all new staff to have a pre-employment check carried out by Access NI, at the Department of Justice.

1.2 The recruitment of all posts in the Bytes Project is centralised at Head Office, which administers all recruitment exercises.

1.3 Applicants for posts with substantial access to children, young people, or vulnerable adults - whether permanent, temporary, full-time, or part-time, are required to have a Pre-employment check carried out which will be administrated by Head Office.

1.4 On completion of the interview's pre-employment checks are requested after applicants have been recommended for appointment but before they are appointed to the post.

1.5 The Bytes Project Director and the Project Administrator are authorised to request and receive such information, and any results are returned to them. The information provided by the Police and Access NI is confidential.

1.6 The Project Director will decide with assistance when necessary from the Bytes Board of Trustees, as to the candidate's, suitability for working with children, young people, and vulnerable adults, taking into account only those offences which may be relevant to the post.

1.7 A regulated activity provider (Employer of volunteers or staff in regulated activity), the Bytes Project has a legal duty to notify the Independent Safeguarding Authority (ISA). If they have withdrawn permission for a person to engage in regulated activity because the person has:

- Received a caution or conviction for a relevant offence.
- The harm test is satisfied

2. AGENCY STAFF

2.1 The Bytes Project ensures that any Employment Agency supplying temporary staff to cover posts with substantial access to children, young people, and vulnerable adults is required to carry out the necessary Police and Access NI checks on the Bytes Project's behalf to ensure the suitability of the Agency Staff for working with children, young people, and vulnerable adults.

3. VOLUNTEERS

3.1 Where individuals volunteer to work in an unpaid capacity in The Bytes Project premises where there is substantial access to children, young people, or vulnerable adults, The Bytes Project is responsible for ensuring that the appropriate consent is obtained from the volunteers, and the necessary Police and Access NI checks are undertaken.

4. EXTERNAL FACILITATORS, CONTRACTED ORGANISATIONS, AND DELIVERY PARTNERS

4.1 The Bytes Project Child Protection and Safeguarding Vulnerable Adults Policy does not apply to partner organisations as we expect all partners to have their own safeguarding policies and procedures which reflect the local context and legal framework.

We do however expect partners to be aware of our policy and to collaborate closely with it in all aspects of safeguarding while working in partnership with us.

4.2 In addition, all external facilitators, contracted organisations, and delivery partners will be asked to provide The Bytes Project with copies of their latest Child Protection and Safeguarding Vulnerable Adults Policies. Organisations and individuals must work in partnership to ensure children, young people, and vulnerable adults are safeguarded as effectively as possible.

ADDENDUM FOR GUIDANCE NOTES FOR HIRERS /VOLUNTEERS OF THE BYTES PROJECT SERVICES AND PROPERTY

1. INTRODUCTION

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The Bytes Project wants to ensure that children, young people, and vulnerable adults are protected from harm while on site in any of its properties. In addition to its responsibilities The Bytes Project asks that Hirers / Volunteers exercise their own responsibilities and abide by the Bytes Project's Child Protection and Safeguarding Vulnerable Adults policy.

1.1 In particular all Hirers/Volunteers shall:

- Make sure they have adequate staff supervision using the ratios as laid down by the Education Authority.
- Ensure that they supervise the children/young people/vulnerable adults at all times.
- Refrain from either verbally or physically abusing a child/young person/vulnerable adult and ensure adequate insurance cover for the group and leaders.
- Inform their group of behavioural expectations while using the Bytes Project's facilities.
- Adhere to the Bytes Project's Child Protection and Safeguarding Vulnerable Adults policy.

The Bytes Project wishes to remind all Hirers/Volunteers that the primary responsibility for the welfare of the children, young people, and vulnerable adults rests with them at all times.

1.2 Group behavioural expectations while using The Bytes Project facilities

The Bytes Project always expects that its visitors/users of its services display courtesy and respect for others and The Bytes Project property.

Hirers/Volunteers should therefore not allow members of their group to:

- Make any sectarian, sexist, racist, or other offensive remarks toward any person or other group.
- Vandalise The Bytes Project property.
- Leave litter in or around The Bytes Project property.
- Bad language.
- Smoke.
- Drink alcohol.
- Bully (verbally or physically).
- Use of threatening, abusive, or violent behaviour.

If any of the above is not followed the Bytes Project reserves the right to refuse future requests to hire or use its facilities and/or ask the group to leave.

ADDENDUM - FOR GENERAL AND/OR PARENTAL COMPLAINTS POLICY & PROCEDURE

The Bytes Project is committed to taking parental complaints and concerns seriously, at the earliest stage, in the hope of keeping the number of formal complaints to a minimum and without needing formal

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procedures. However, depending on the nature of the complaint, you may wish or be asked to follow the organisations formal complaints procedure.

Policy Statement

The Bytes Project promises that it will pursue actively any parental complaints received in connection with its services, staff conduct or organised activities. This procedure sets out what will be done to make sure this happens.

Employees and volunteers will take responsibility to own “problems” and deal with them through the complaints procedure. An important test of good service is that whoever the complainant happens to contact first must ensure that they are sympathetic and listen to the concerns with the aim of resolving the complaint at this first opportunity. Dealing with complaints is the responsibility of everyone. Staff will be trained, where appropriate, in appropriate skills and behaviours. This is to make sure the approach to complaints is consistent, of a high standard, and always addressed with a “client first” ethos.

Aims of the Parental Complaint Policy/Procedure

To enable all employees and volunteers to understand the importance of a speedy and effective response to a complaint.

To ensure a consistent approach to all complaints.

To help identify recurring problem areas so that improvements can be made.

Responsibility

The Head of Projects is responsible for the development and monitoring of this policy and making sure all employees/volunteers know and understand their responsibilities. He/she will also make sure that complaints are recorded, monitored, and satisfactorily resolved and reported.

Definition

A complaint is any expression of dissatisfaction with a service or the organisation or its employees or volunteers that needs a response.

Procedures

All complaints are logged and recorded by the employee or volunteer who receives the complaint. This will show the following:

- Date and time of complaint
- Name of staff member completing the record
- Short description of complaint #
- Action taken
- Outcomes

Complaints can be received by:

- Letter
- Email
- Telephone
- Face to face

The Youth Worker/Staff Member who logs the complaint is responsible for informing the Head of Projects this has happened and making sure the information is accurate and logged as soon as possible.

This recording is vital in making sure the parent is not repeatedly asked for information again, should the complaint be escalated.

Outcomes are recorded when the complaint has been resolved to the satisfaction of the complainant.

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The aim is to resolve all complaints as swiftly as possible. All complaints will be acknowledged via letter/email within 5 working days of receipt. Complainants will be advised in this communication of the complaints procedure and details of who they can speak to about it. This will be supplied at all stages.

Procedure

There are three stages to the complaints procedure:

Stage 1 - Resolve at the first point of contact – Youth Worker

All attempts should be made to resolve the complaint immediately by the person who receives the complaint, at this first point of contact. It is envisaged that the majority of complaints will be resolved at this stage.

If the complainant decides they are not satisfied, or the member of staff is unable to resolve the issue, then the complaint moves to Stage Two.

Stage 2 - Head of Projects

It is envisaged that all complaints should be resolved and dealt with satisfactorily from the viewpoint of the complainant at this stage. The complaint will be reviewed by the Head of Projects who will investigate and respond to the complainant within 10 working days.

If the complainant is not satisfied, they have the right for their complaint to be dealt with by the CEO/Deputy CEO.

Stage 3 - Escalated Complaint to CEO/Deputy CEO

Complaints at this stage are considered to be very serious. The complaint is passed to the CEO/Deputy CEP to deal with. He/she will investigate the complaint and after gathering all evidence will give an appropriate written response to the complainant within 5 working days. If this is not possible the complainant will be kept updated regularly on progress whilst the complaint is being investigated.

It is the intention that all complaints will be resolved at this point.

Complaints about the CEO/Deputy CEO

If the parental complaint is about the CEO or Deputy CEO, complainants will be invited to complain to the other Trustees. In these instances, it is the responsibility of the Board of Trustees to resolve the issue. A representative from the Board will send the Parent a full written response within two days of its meeting.

ADDENDUM – FOR PREVENTATIVE PRACTICE

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Many children are unable to recognise abusive or unsafe behaviour or identify who/what poses a threat to them and they may not know how and where to seek help.

Preventative education can give children the knowledge and skills they need to keep themselves safe and it can also help to disclose safeguarding issues earlier.

The Bytes Project delivers preventative and early intervention work to support children, young people and vulnerable adults to take steps to safeguard themselves from harm or risk of harm.

Preventative work that The Bytes Project Delivers to Children, Young People and Vulnerable Adults include, but are not limited to:

- Positive Relationships
- Mental and Emotional Well-being
- Child Sexual Exploitation (CSE)
- Bullying & Cyber Bullying
- Keeping Safe Online
- Drugs and Alcohol Awareness
- Young People and Youth Justice
- Anti-Social Behaviour Awareness
- Physical and Mental Health Awareness
- Promoting Resilience in Children and Young People

Bytes Preventative Practice and Early Intervention Work is bespoke; designed and delivered to meet the needs of the target group. Parental consent is sought before Awareness Raising and Keeping Safe workshops are delivered, and background information on the participants to establish individual needs of each individual.

The Bytes Project delivery staff and/or external facilitators deliver a full brief prior to each session to make participants aware of the content and delivery materials, to avoid any triggers in young people who are victims of abuse, CSE, or addictions.

ADDENDUM – FOR GENERAL SAFETY AND MANAGEMENT OF ACTIVITIES

Centre activities, events and residential:

- The primary responsibility for the child, young person, or vulnerable adult rests with the Parent/Legal Carers/Bytes staff.
- A register should be kept of all those who attend on any given day:
 - Name _____
 - Address _____
 - Emergency contact numbers _____
- An accident report form should be completed to record any untoward event or incident. See Appendix 2.1 for an Accident Report Form

APPENDIX 1 - TRIPS AND RESIDENTIALS

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DAY TRIP/RESIDENTIAL PLANNING CHECKLIST**

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Centres Involved: _____

Date/Dates of Visit: _____

Venue: _____

Staff member responsible: _____

Other staff members involved: _____

	YES	NO
Centre cover has been arranged by management		
The nature of the visit has been established		
The target group has been identified		
All the relevant information regarding the proposed visit has been presented to management e.g. destination, itinerary, timescales etc		
Management has approved the proposed visit		
A risk assessment has been undertaken for all aspects of the visit(s) and appropriate control measures have been put in place and recorded: Full health and safety (first aid, fire safety, recording and consent etc)		
• Hazards have been identified		
• People who may be at risk have been identified		
• Evaluation of the risk has been identified		
• Additional safety and/or control measures have been established		
• Information has been disseminated to all relevant persons and Appropriate records maintained.		
Where residual risks (inherent in all visits) still prevail an appropriate Contingency/emergency plan has been put in place and disseminated to all relevant persons		
The number of leaders has been agreed:		
• A group leader has been identified		
• Accompanying staff have been identified		
• ACCESS NI checks have been undertaken		
• Correct gender and ratios have been organised		

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APPENDIX 1.1 DAY TRIP/RESIDENTIAL PLANNING CHECKLIST
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	YES	NO
Leaders are fully aware of:		
• Their roles and responsibilities		
• The standard of conduct required of them during the visits		
Young people and parents (as appropriate) have been informed/briefed and understand the implications of their participation in the visit		
Parents/guardians have given written consent for under 18s to participate		
List of contact details for young people and parents has be given to line manager for emergency purposes		
All relevant information (medical, dietary and contact details) pertaining to the young people participating in the visit (s) has been obtained, recorded and appropriate action taken where necessary.		
The transport arrangements for the group are appropriate for the nature or type of journey planned		
Adequate insurance is in place to cover all aspects of the visit, including transport		
Where a residential visit is planned, the overnight accommodation has been assessed as appropriate in terms of:		
• Its suitability for the group		
• Its compatibility with the objectives of the visit		
• Child protection reporting procedures		
Where the visit involved outdoor or adventurous activities, management and group leader are satisfied that:		
• Appropriate management structures and systems are in place in relation to child protection/health and safety		
• Staff are competent to provide the activities		
• All relevant checks have been undertaken to ensure the above are In Place		
Management has approved the operational arrangements for the visits		
Signed (staff member): Date:	Signed (line manager): Date:	

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Appendix 1.2 CONSENT FORM FOR RESIDENTIALS AND OUTINGS

Anything written on this form will be held in confidence. The leaders need to know these details in order to meet the specific needs of your child.

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Location of Trip	
Dates of Trip	
Cost of Trip	
Contact Name & Number for Trip	
Other useful trip information	

I give permission for my child to attend the organisations which I have marked above at their usual meeting places and participate in all their activities

Young Person's Name			
Name usually known by			
Date of Birth		Age on date of trip	
Address			
Postcode			
Phone number			

Emergency Contact Information

Name of Emergency Contact	
Relationship to Young Person	
Mobile Phone Number	
Home Phone Number	
If unavailable contact:	
Home/Mobile Phone Number	
Please indicate any known medical conditions, special needs, allergies or dietary Requirement.	

In the event of illness or accident, having parental responsibility for the above named young person, I give permission for first aid to be administered where considered necessary by a first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner. In the event of a medical emergency, leaders will endeavour to contact you as soon as possible using the contact telephone numbers given.

During the trip, photographs or video may be taken for general Bytes Project purposes and publicity and for this we need your permission. On signing this form we will assume that you have given permission for your child's photograph to be taken unless otherwise informed.

I confirm the above details are accurate to the best of my knowledge			
Signed		Date	

APPENDIX 2

FORMS AND INFORMATION

This section includes some useful and essential forms to be used as required.

A risk assessment form is an important tool in child protection. This can be found in the Bytes Health and Safety Policy. Appendix 13.4 Provides information on low, medium and high risk activities to support completion of a risk assessment.

2.1 Accident Report Form

2.2 Personal Care Plan for Special Needs Clients

2.3 High Risk, Medium Risk and Low Risk Activities

2.1 ACCIDENT REPORT FORM (PAGE 1 OF 2)

This form should be completed immediately after any accident or significant incident. Once completed, a copy should be forwarded to the line manager and stored confidentially indefinitely.

Day:	Date:	Time:
Name, contact details and ages of those involved in the accident/incident:		
Where did the accident/incident take place?		
Who was responsible for the group? (Name, address and telephone number)		
Who witnessed the accident/incident? (Names, addresses, telephone numbers and ages if under 16). Normally only two witnesses would be needed.		
1.	2.	
Describe the accident/incident. (Include injuries received and any first aid or medical treatment given)		

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Concerning equipment involved:				
Have you retained any defective equipment?	Yes		No	N/A
If so, where is it being kept?				
What action has been taken to prevent a recurrence of the accident?				

Is the site or premises still safe for use?	Yes		No	
Is the equipment still safe for use?	Yes		No	
Have parents/carers been informed?	Yes		No	
Has the Line Manager been informed?	Yes		No	
Has a Designated Officer been informed?	Yes		No	

Signature of person in charge of group at time of incident/accident		
Signed:	Print Name:	Date:
Signature of Designated Person		
Signed:	Print Name:	Date:

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2.2 PERSONAL CARE PLAN FOR SPECIAL NEEDS CLIENTS

Everyone should be treated with respect and dignity. It is important to consider how best to support the special needs of clients.

2.2.1 Planning your programme

- Focus on what the individual can do, rather than what they can't do.
- Aim to be inclusive, think about how the activities can be amended to include a person who has special needs within the group.
- Try teaching to different learning styles e.g. a drama or DVD instead of reading.
- Individuals who have special needs may interact well with music, instruments, visual and audio stimuli, textures.
- Be age appropriate.

2.2.2 Extra help

- Ask the individual's parents or carers to find out how their needs are best met at home or school. For example, do they use pictures or Makaton to communicate?
- Research conditions/circumstances to find out about how you can best support the individual in the group.
- Check if there are any triggers for behaviour problems e.g. loud noises or eating/drinking problems.

2.2.3 Personal Care

- Try to have the same staff member involved in helping them.
- Draw up a personal care plan.

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2.2.4 PERSONAL CARE PLAN FORM

INFORMATION FOR STAFF ONLY	CONFIDENTIAL
NAME OF INDIVIDUAL:	
DATE:	
Eating/Drinking e.g. needs reminded to eat or drink, needs food intake monitored, Allergies	
Medical e.g. medication, inhalers, treatment	
Behaviour e.g. reacts to loud noises, difficulty holding attention	
Mobility e.g. difficulty in some movements	
Likes/Dislikes e.g. bright or flashing light, repetitive actions, particular tasks	
Any other relevant information:	

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2.3 HIGH RISK, MEDIUM RISK AND LOW RISK ACTIVITIES

HIGH RISK ACTIVITIES	
Water sports	Rafting
Potholing	Racing other than on foot
Flying	Bonfires
Hang Gliding	Hot air ballooning
Physical contact sports (e.g. boxing, fencing, martial arts)	Use of firearms (Inc clay pigeon shooting, airsoft, paintballing)
Parachuting	Use of power driven machinery
Winter sports	Fireworks
Motor vehicles, Go-Karting, Quad Bikes	Mountain Biking
Mountaineering	Cliff or rock climbing
Abseiling	Skateboarding
Rugby	American Football

MEDIUM RISK ACTIVITIES	
Bouncy Castles, Inflatable Slides/Runs	Tractor Rides
BBQs	Community Events e.g. 'Party in the Park'
Pony rides	Rodeo Bull
Archery/Darts	Ice Skating
Mini assault courses	'It's a Knockout' Competitions
Football competitions	Sports camps
Trampolining	Bowling

LOW RISK ACTIVITIES	
Sponsored Walk	Fun Run
Art Exhibition	Coffee Morning
Cinema Trip	Table Quiz