Welcome! 

Welcome to the team of volunteers for Doulas Without Borders. Without you, we would not exist, so we would like to take this opportunity to say how grateful we are for your support.

We are a robust and growing community of Doula volunteers and are proud to welcome you on board. Please read below carefully.

DWB mission, vision and ethos

Doulas Without Borders (DWB) was born from a simple belief. We believe ‘Every woman and birthing person deserves a Doula’ including those who can’t afford one, are experiencing vulnerable times, are unsupported and have lived through trauma. Doula support is usually unavailable for those in high;y vulnerable circumstances, although the need is great, and growing. Women and people are often isolated and afraid during this formative time; without support, education or companionship.

It is the vision behind DWB to provide a strong, vibrant and robust network of DWB team members to support, advocate for and nurture the mother, across the world.

Pregnancy, birth and new mother/parenthood brings a powerful opportunity to break cycles of abuse and neglect, by feeling safe, informed, supported, connected and confident. We know that these elements encourage attachment and bonding for new parents and babies, which can contribute towards new cycles of empowerment, bonding and attachment for the next generations. It is our mission to help create these opportunities with our voluntary Doula service.

Our specific aims are to offer Doula care to women / people who are unsupported and in financial hardship *and*:

• Have new refugee or asylum-seeking status

• Are under 20 years old

• Have survived sexual and / or any form of abuse or violence

• Are experiencing homelessness

• Have survived human slavery and / or trafficking

• Who are choosing through termination, or experiencing through miscarriage or stillbirth, infant loss.

**We can only offer support if the person is in extreme financial hardship, eg: *unable to provide ongoing payment for accommodation and food.* For those who are experiencing a more borderline financial hardship and/or are supported in some ways, we suggest that the person applies for a low-cost Doula via Doula UK or other agencies. (We will, on occasion, be able to assist with more borderline requests, depending on availability).**

Our overall aims are to:

• To support a more informed, dignified and supported pregnancy, birth and postnatal experience

• To encourage bonding and attachment

• To encourage all towards empowered self-directed problem-solving, through collaborative means, wherever possible

• To contribute towards the improvement of quality of life and resilience for future generations who are born into vulnerable circumstances.

**In short, our mission is:**

To provide support, education and advocacy for pregnant and newly mothering women/people, as a means to invite empowerment, offer nurture and promote a positive effect on future generations.

**Our vision is:**

That every person in the childbearing year who is in financial hardship and has experienced trauma has a trained, supportive and empowering companion, who fosters and facilitates positive birth and early parenting, assisting in (re)building connection and community for new families.

**Our ethos is:**

Our ethos is based on trauma-informed, non-judgmental, supportive and empowering foundations. We do not discriminate against people on grounds of religious, race, culture, financial, social, mental or physical differences, previous choices, current circumstance or sexual orientation. We firmly believe that each individual is the expert on his or her healing and we strive towards collaborative and client-centred approaches.

**Who we are:**

We are a group of people who have come together from many different backgrounds, most of us are doulas and mothers, some of us are language specialists, activists, midwives, therapists, feeding supporters, antenatal teachers and support workers.

You will find within this handbook all the guidelines and procedures for DWB. However, should you have any questions, please contact us at: info@doulaswithoutborders.com

To outline your support contacts, you will find **Community Elders** within your local area and if there isn’t one near you yet, you might be directed to whoever is available for phone debriefing.

If you think you might have what it takes to offer **Community eldership**, please contact us at: elders@doulaswithoutborders.com

On the website, you’ll find **Consultant Elders** who can offer you specific support in their specialist subject via pre-arranged calls.

If you think you might have what it takes to offer **Consultant Eldership**, please contact us at: info@doulaswithoutborders.com

If you need to speak with a Consultant Elder, please contact us at: info@doulaswithoutborders.com

**Roles and Responsibilities within the organisation:** 

*All team members are expected to maintain the highest integrity, awareness and use of a trauma-informed and responsive approach, at all times.*

**Doula’s Role**: The role of the DWB Doula is to provide unbiased, nurturing and grounded lay support. Signposting, active listening and collaborative approaches are part of the role. Ensuring that you only ever work within your own sense of safety and well-being and that you take 100% responsibility for your own practice are key elements of this role. **Reflective practice, peer support and continuous confidential debriefing** within the DWB team are foundational parts of this role.

Responsibilities: Doulas are responsible for all aspects of practice and are expected to work within the boundaries of a non-professional support person, offering no medical advice or diagnosis, but signposting,

offering collaborative and empowering information towards choice, and advocacy of those choices wherever possible is expected.

Doulas are responsible for filling in and returning Client evaluation forms and Active doula forms.

Doulas are responsible for debriefing with peers and with Community Elders where available, ensuring that you receive the support you need, that reflective practice is used and that you utilise the support offered to ensure feedback is given on any situation which needs addressing.

**Consultant Elders role**: The role of the Consultant Elder is to provide support on their specialist subject and related advice to Doulas, infant feeding supporters, therapists and all other DWB team members. This can be done by phone call at appointed times, and arranged by what’s app / texts, or in person when possible.

Responsibilities: It is the responsibility of the consultant elder to ensure up-to-date and unbiased information only is passed on to team members and that if there is a problem which is out of their jurisdiction or capability, or if they need a second opinion, they contact / refer on to either another consultant, an outside source or to someone within the leadership team.

**Community Elders role**: The role of the Community Elder is to support Doulas within their community and to act as a bridge between Doulas, Clients and the leadership team.

Responsibilities: Community Elders are expected to know which Doulas are in her area and arrange regular meetings to discuss, debrief, support and then report back to the leadership team any needs or emerging issues. Community Elders may also be involved in collecting data.

**Safeguarding (SG) leads role:** The role of the safeguarding leads is to provide backup support to Doulas who need to ask advice, to team members dealing with referrals, to educate doulas about what safeguarding is and how to deal with SG issues, if and when they might arise.

Responsibilities: SG leads are responsible for answering phone calls and messages pertaining to safeguarding issues and ensuring that team members understand their roles within DWB around safeguarding.

**Leadership team (LT) roles:** The leadership team, in its various roles, is primarily receiving referrals, updating the website, recruiting new members, holding the vision of DWB and ensuring that both local and national needs are being met and issues addressed. LT will be pursuing collaborative partnerships, updating and creating new training, inviting new guest teachers to offer their sessions, overseeing the organisation, the Community and Consultant Doulas and all other team members.

Responsibilities: The responsibilities include day-to-day running of the organisation, dealing with referrals from both individuals and agencies, writing and delivering training sessions, ensuring that feedback from Consultant and Community Elders is listened to and acted upon where necessary.



Code of conduct:

All team members to uphold all protocols and practice guidelines herein.

**Code of Practice: All team members are to follow our Code of Practice to ensure quality, professional and ethical care.**

**A Doulas Without Borders (DWB) Doula:**

-Is accountable for their own practice in any environment in which they might work

-Does not offer clinical or medical advice, carry out tasks or diagnose conditions, regardless of any healthcare or clinical qualification

-Understands both the scope and limitations of their role, offering unbiased information and signposting to support the parent/s in making informed choices

-Is continuously aware of the potential for un-debriefed stories to impact their attitude as a practitioner: therefore, all DWB doulas will ensure that they receive regular debriefing and that they utilise their peer and elder support

-Always conduct themselves with integrity and respect towards clients, hospital staff and other professionals, within or outside of the colleague’s organisation

-Upholds clients’ confidentiality and privacy according to the GDPR regulations and within practice guidelines

-Make ethical and informed decisions about when it is appropriate to share information and with whom within the organisation in order to provide the best level of care and safety for the mother / family and child. **If in doubt, DWB doulas will always seek advice from an elder before taking action**

**-**With regards to the sharing of information outside of the organisation, through a need to signpost or refer, DWB doulas will uphold client confidentiality, unless there *is immediate and/or significant risk to mother/person, un/born baby or sibling.* Should this be brought to the doula’s attention, they will follow the DWB safeguarding procedures

-Works honestly within their level of qualification and with experience and does not mislead other doulas, clients or professionals

-Provides any required records, agreements, and reports for all births, postnatal support, therapies and classes/sessions given

-Stays updated with changing protocols and guidelines, remaining flexible and current in their practice

-Has a current enhanced DBS/PVG check

**All DWB team members take full responsibility for their actions, always working within their remit and never attempting to provide any clinical practice, medical advice or diagnosis (even if they have qualifications and / or experience).**

*DWB upholds the values of care and consideration and we agree to treating one another as well as those we work with, with absolute kindness and respect*

**DWB team members to uphold this code of conduct by acknowledging and practising a zero tolerance policy for bullying, cyber trolling, unkindness or any attempt to make anyone feel lesser**

- Anyone who displays bullying, condescending or unkind behaviour will be given a warning -Should it happen a second time, the team member will be asked to attend a mediated meeting -Should it happen a third time and without a resolution plan in place, the team member will be asked to leave

**All team members to remain culturally humble and responsive. This practice includes maintaining a ‘beginners mind’ approach, in which we readily:**

-acknowledge each person is unique and their relationship to their own culture, race and any diversity is also unique

-expect to get things wrong, but remain curious and open and not afraid to ask questions of the individual around how best to support them, *only when it is appropriate*

- always to educate ourselves on the history and culture of that person's background and commit to raising our own awareness around each person’s unique set of values, relationships and

All team members to remain aware that we are there to support and signpost, to empower through collaborative approaches and to provide nurture and empathy, **but not to fix / rescue**. This means remaining mindful of ways in which your own needs can be in danger of overlapping your client’s needs, so all team members must stay aware that we are not in need of:

*Fixing the problem, needing to be of value, being approved of or ‘down with’ your client, being the one with ‘authority’, filling silent spaces or looking like you’re an expert.*

Committing to an awareness of what might be lacking within your own life will contribute towards your ability to support from a healthy, neutral place and help prevent burn out.

DWB Safeguarding Policy

There is a raft of legislations keeping people safe from harm, such as the Human Rights Act 1998, the Care Standards Act 2000 and the Mental Capacity Act 2005.

In accordance with the Safeguarding Vulnerable Groups Act 2006, it is an offence to recruit people to work with children, young adults and vulnerable adults that the organisation knows are barred and there is no distinction between paid and voluntary positions-all must be vetted.

Scope

• All team members of DWB

• Associated personnel whilst engaged with work or visits related to DWB, including but not limited to the following: management team, doulas, coordinators, safeguarding leads, elders, language specialists, course facilitators, education consultants, therapists, helpline workers, community doulas, feeding supporters, volunteers, contractors, programme visitors, funders, partnering agencies.

Purpose

Safeguarding is highly important to Doulas Without Borders (DWB) at every level of the Organisation and the protection of the unborn baby, children, young people and vulnerable adults is paramount.

DWB recognises that it is each team member’s responsibility to safeguard the welfare of all unborn babies, children, young people and vulnerable adults and that this includes awareness of the need for protection from physical, emotional, sexual abuse, bullying and neglect.

The policy lays out the commitments made by DWB and informs all members and associated personnel of their responsibilities in relation to safeguarding.

The purpose of this policy is to protect people, particularly unborn babies, children, young adults and at risk adults and beneficiaries of assistance, from any harm that may be caused due to their coming into contact with anyone, during the time in which we work together. This includes harm arising from:

• The conduct of staff or personnel associated with DWB.

• Any family member / known or unknown person within the client’s life.

• The design and implementation of DWB’s programmes and activities.

DWB recognises how triggering these subjects can be and we therefore remain vigilant in addressing our own reactions as a means to preventing personal reactions interfering with judgements or actions taken. We will confer with an experienced team member / consultant elder / leadership team member whenever permission to share is granted from a client and seek assistance in confidence when and if we conclude that our ability to make decisions is compromised by our reactions.

Policy Statement

• DWB believes that everyone we come into contact with, regardless of age, gender identity, disability, culture, sexual orientation or ethnic origin has the right to be protected from all forms of harm, abuse, neglect and exploitation. DWB will not tolerate abuse and exploitation by team members or associated personnel.

• All disclosures of abuse will be dealt with in a calm, mature and nurturing way. • Each team member will ensure that her client understands the parameters for confidentiality versus the potential of a need to break confidence due to a safeguarding issue.

• A request for sharing of information within the team can be made of the client if the team member finds herself triggered / needs support / a second opinion and remains aware that if she should feel unable to make clear judgements or actions, she can and must seek out assistance in confidence and anonymity from an elder/safeguarding lead/member of the management team.

• Confidentiality will be upheld always until and unless there should be an immediate or significant risk to either unborn baby, mother, sibling or any other children. In this case, the safeguarding procedure will be initiated.

DWB responsibilities:

DWB will:

• Ensure all team members have access to, are familiar with, and know their responsibilities within this policy.

• Design and undertake all its programmes and activities in a way that protects people from any risk of harm that may arise from their coming into contact with DWB. This includes the way in which information about individuals in our programmes is gathered, stored, shared and communicated.

• Implement stringent safeguarding procedures when recruiting, managing and deploying all team members and associated personnel, to include DBS checks are in place.

• Ensure Doulas are offered training on safeguarding at a level commensurate with their role in the Organisation.

• Follow up on reports of safeguarding concerns promptly and according to due process, where appropriate.

Individual’s responsibilities:

DWB team members and associated personnel must not:

• Engage in sexual activity with anyone who is or was a service-user

• Sexually abuse or exploit children

• Subject a child to physical, emotional or psychological abuse, or neglect

• Engage in any commercially exploitative activities with children including child labour or trafficking or refrain from reporting any such activity to Safeguarding lead or deputy.

• Sexually abuse or exploit any service-using adults; meaning that due to the nature of various vulnerabilities we might come across, coupled with the intimate nature of our work, we will remain at all times professional and adhere to the ‘personal boundaries’ policy, regardless as to whether we might be invited to become closer with any service user or ex-service user. This would incorporate

an abusive and / or exploitative move on the DWB team member’s part as such relationships are based on inherently unequal power dynamics due to the nature of our employ.

• Subject any service-using adult, baby-in-utero, sibling or DWB team member to physical, emotional or psychological abuse, or neglect; **including** always ensuring we immediately seek assistance for any situation in which we consider that there is an immediate or significant risk to any of the people involved with or associated with DWB. **Including** if any DWB team member is in doubt as to the potential for neglect or the emotional, physical, psychological safety and well-being of any of the people mentioned above, said member will immediately seek out further support and advice from safeguarding personnel, team leaders (elders, coordinators, management) and that a group decision will swiftly be made in terms to the best action.

DWB team members and associated personnel are obliged to:

• Contribute to creating and maintaining an environment that prevents safeguarding violations and promotes the implementation of the Safeguarding Policy.

• Report any concerns or suspicions regarding safeguarding violations by an DWB staff member or associated personnel to the appropriate team member (Safeguarding leads).

Safeguarding procedures:

People with care and support needs, such as vulnerable people or people with disabilities, are more likely to be abused or neglected. They may be seen as an easy target and may be less likely to identify abuse themselves or to report it. People with communication difficulties can be particularly at risk because they may not be able to alert others. Sometimes people may not even be aware that they are being abused, and this is especially likely if they have a cognitive impairment. Abusers may try to prevent access to the person they abuse.

If you have any concerns about the welfare of a child, you must seek immediate support. Contact your community elder, a consultant elder, the leadership team at the email addresses above and we can discuss you contacting the NSPCC helpline where a counsellor can assess the situation and advise you further.

Meetings only to be carried out at a client’s place of residence only if considered a **safe place, with no perceived risk.**

*Being considered* ***‘a safe place’*** *is ascertained by yourself, the referrers and your colleagues on receipt of referral form. This consideration is held in continuous awareness of the potential for change, so all team members must stay in close touch to update one another.*

*‘****No perceived risk’*** *indicates that, to the best of their knowledge, the referrer, the leadership team, any Elders involved (and other team members including help-line staff in the future) have found no immediate or significant risk factors for yourself, your client and her baby. This consideration is held in continuous awareness of the potential for change, so all team members must stay in close touch to update one another*.

If clients place of residence is not considered a safe place as there is a known risk/ known threat to anyone, then the meeting must be arranged in a public place and 2 team members must attend.

**Escalation**:

**Be prepared to always leave any meeting at any sign of a situation becoming physically unsafe.**

Should a situation arise in which there is any perceived **immediate or significant physical safety** issues for anyone concerned:

\* Ensure you are physically safe by leaving situation. Do not attempt to fix it/rescue/call someone. \* Once you’re physically safe, Call 999.

\* Text/what’s app/use ‘signal’ for an update to any other Doula involved with client, with client’s initials only.

\* Report to an Elder Doula at earliest time possible.

\* Ensure you have a debriefing with another Doula.

Enabling reports

DWB will ensure that safe, appropriate, accessible means of reporting safeguarding concerns are made available to staff and the communities we work with.

DWB will also accept complaints from external sources such as members of the public, partners and official bodies. See complaints policy for more details.

How to report a safeguarding concern:

Team members who have a complaint or concern relating to safeguarding should report it immediately to the Safeguarding lead. If the team member does not feel comfortable reporting to their Safeguarding lead (for example if they feel that the report will not be taken seriously, or if that person is implicated in the concern) they may report to any other appropriate staff member. For example, this could be a member of the Leadership Team.

**Named safeguarding leads are:**

**Lorretta Hepburn**

**Katy Massey**

DWB will apply appropriate measures to any team member found in breach of policy.

DWB will offer support to survivors of harm caused by staff or associated personnel, regardless of whether a formal internal response is carried out (such as an internal investigation). Decisions regarding support will be led by the survivor.

**Equality and Diversity Policy:**

**DWB offers our services to anyone who identifies as a mother OR any person who is physically housing, birthing and raising a baby.**

DWB is dedicated to encouraging a supportive and inclusive culture amongst the whole workforce. It is within our best interest to promote diversity and eliminate discrimination in the workplace.

DWB aims to ensure that all members are given equal opportunity and that each member will be valued and respected and able to give their best as a result.

DWB aims to ensure that all members of the public accessing and using our services are given equal opportunity and will be valued and respected. There will be no discrimination on the grounds of age, disability, marriage/civil partnership status, race, ethnic origin, nationality, national origin, religion or belief or sexual orientation.

DWB commits to make training, development and progression opportunities available to all members.

DWB encourages anyone who feels that they have been subject to discrimination to raise their concerns with the leadership team, who will investigate and implement further procedures if deemed necessary.

DWB commits to regularly reviewing our policies and procedures so that fairness is maintained at all times.

Confidentiality Policy and Procedure:

**This applies particularly to information relating to clients, individual staff records and details of terms.**

**Trust is a key principle within Doulas Without Borders.**

**Within the course of your duties you will acquire or have access to confidential information which should not be disclosed to any other person unless in the pursuit of your duties or with specific permission given.**

This includes information held on computers and computer printouts. DWB team members are required to ensure that information about clients is safeguarded to maintain confidentiality and is kept securely. This means that client information can only be passed to someone else if it contributes to the provision of care or the effective management of services within DWB. If you are in any doubt as to which disclosures are unauthorised, check with the management team.

You must return to DWB upon request and in any event upon the termination of your voluntary role, all documents and tangible items which contain or refer to any confidential information and which are in your possession or under your control.

A breach of confidentiality may lead to disciplinary action and could result in dismissal. You should also be aware that regardless of any disciplinary action taken, a breach of confidence could also result in a civil action for damages.

The Data Protection Act 1998 regulates the use of all information relating to any living identifiable individual that DWB may hold, regardless of the media in which it is held. This information may be as basic as name and address. Unauthorised disclosure of any of this information may be deemed a criminal offence. If you are found to have permitted the unauthorised disclosure of any such information, you and the organisation may face legal action.

You must not, whether during or after your employment with DWB, unless expressly authorised by the Leadership Team, make any disclosure to any unauthorised person or use any confidential information relating to the business affairs of the organisation. This includes any detail about clients and employees,

actual, potential or past and all details relating to information on any of the organisations databases, ensuring that printouts are treated carefully.

*I confirm that I am aware that I have a legal duty of confidentiality to all clients of DWB, past, present and prospective. I further confirm that I will not disclose any unauthorised information relating to clients or team members or the Organisation’s affairs and those of other associated organisations to any other party.*

*I am aware that any breach of this undertaking is a serious matter that may lead to disciplinary action. The Organisation may also instigate legal proceedings against an individual who does not comply with its confidentiality requirements.*

There may be occasions when staff have a duty to raise concerns over safeguarding issues and the legal duty of confidence to clients may be overridden. In all cases reference must be made to your Elder, Safeguarding Lead or a senior manager who will, if necessary, take further advice before any disclosure is made.

Procedure:

**Confidentiality, consent and the sharing of information.**

You might have an instance where it would be helpful to share information with a team member. This could be due to:

➢ You need some support, or a second opinion within DWB

➢ There is a need for other agencies to become involved / it would be helpful for other agencies to be involved,

➢ Someone within the client’s family needs updating (such as someone with a known positive relationship to your client).

Make client aware that we might share her information amongst DWB and ask permission if you want to pass any details on to other agencies or to family members.

Permission to share information can be shown within your correspondence by the acronym: PTS (permission to share) or PTP (permission to post) but even with permission, **only use initials, no addresses and download and use ‘Whatsapp’ for use with clients and between colleagues.** Delete any digital full name and address information after you have sent or received and copy into notes which can be stored safely within your home, if you need to retain records of anything. Remain vigilant on the phone and with messages.

**Summary:** Make client aware that we might share their information amongst the group, get permission for any other reason you might have to share information, use acronyms PTS AND PTP, use ‘What’s app’, remain vigilant on the phone and with messages, delete any addresses or full names on digital information (but keep thread in case needed) and store paper information safely.

**Confidentiality, no consent and sharing of information:**

Any of these possibilities would be dealt with case-by-case and would involve the Safeguarding leads. If there was an immediate and significant risk, then you would ***follow the safeguarding protocol within this document***.

**Summary:** Check with SG lead if there is a situation which you feel is compromising the health of the mother/parent or their unborn / born baby, follow protocols for safeguarding if there is immediate or significant risk.

**SOME IMPORTANT POINTS TO REMEMBER ON CONFIDENTIALITY:**

➢ Only those with a ‘need to know’ can have access to client details and records.

➢ Do not promise confidentiality if there are words used or visible signs (such as cuts and / or bruises) which lead you to believe there may be immediate or significant risk.

➢ It is against the law to look up confidential information for which you do not have a justified need. ➢ Keep your PC screen and phone out of sight of others if personal information is showing.

➢ Do not leave confidential information lying around unattended or place paper containing confidential information in the bin. It must be shredded or put in ‘confidential waste’.

➢ Log out of your PC or terminal after use and never tell anybody your password. Don’t share passwords.

Promoting good practice:

Doulas Without Borders are passionate about offering a high level of care and this means a continuous level of good practice must be maintained.

Good practice includes:

• Remaining unbiased and non-judgemental

• Remembering that your client will thrive on positive, constructive feedback and encouragement

• Being a good role model means being punctual and not drinking or smoking around your clients

• Always checking about physical examinations and ensuring your client knows their choices, including whether they might want you to leave the room at any time

• Always checking about offering your touch, never presuming

• Continuously learning, researching, attending trainings and generally updating your knowledge base

• Always looking for collaborative ways or working together with your client

• Treating all clients and their children with dignity and respect

• Maintaining empowering relationships by mindful language use and active listening

• Managing your expectations and not making unrealistic promises.

Doulas Without Borders Boundaries Policy.

Below are our DWB boundaries policies. We will use the terms ‘Doula’ or ‘team member’ for everyone within the Organisation and ‘client’ for all those we support.

The Directors of Doulas Without Borders retain the right to hire new voluntary members and to give notice to any team members, as and when needed.

Personal disclosure:

\* Do not give out personal information such as your address or email address to clients

\* Do not give out personal details of other staff to clients, unless it’s a Doula also call and then only necessary contact details

\* Do not connect with clients on social media such as Facebook

\* Keep channels of information on signal/texts/what’s app groups, or on separate phone lines when needed.

\* Be mindful of how much you choose to disclose about your own life/family.

Relationship boundaries**:**

\* If you feel a relationship with a client has become/is becoming compromised, report immediately to your Elder for advice and guidance

\* Do not discuss cases with other clients or third parties. Confidentiality must be upheld

\* Retain transparency by bringing up any issues or concerns about relationship boundaries at your meetings

\* Do not approach clients who are using / who have used DWB services in any social settings. Pay attention to when a client/past client’s behaviour indicates that they do not want to be recognised or identified as a former / current client.

Appropriate Touch**:**

Our policy around the issue of touch is that all Doulas should be very careful, use cultural humility and responsiveness, read body language and use only in supportive context and then only with express permission

Disclosed/undisclosed sexual and/or physical abuse might also affect the physical relationship with you and your client, so take extra care. Always be polite and never presume touch is appropriate. However, as a Doula, touch can be very useful/needed. Ensure you’re clear with your offer of touch and that it is wanted before proceeding. If it’s possible to talk this through prenatally, even better. Discuss this with your team regularly.

Financial**,** possessions and gifts**:**

-Do not lend personal money or possessions to clients, unless you have spoken with an Elder / Coordinator first

-Do not borrow money or possessions from clients.

-Do not accept large gifts and refer to your Elder if you’re offered a small token gift, to ensure it’s appropriate to accept it and to provide consistent transparency.

**Doula Without Borders application and rights to refusal policy**

The initial application for becoming a member of DWB is to fill in a questionnaire. From there, you will need to gain a DBS or PVG check.

Any necessary withdrawal of membership would include removal from social media groups and would incorporate our policy of ongoing confidentiality for ex-members

With regards GDPR, DWB will confirm by email the termination of your membership and will remove of all your information from our databases. It is also required that you destroy and delete all documentation relating to the organisation of DWB from any hardcopies/folders, inboxes and all other locations within digital devices

Doulas Without Borders reserves the right to refuse initial (or terminate ongoing) membership without notice.

**DWB rights to refusal of service:**

Doulas Without Borders retain the right to refuse to offer services, based on lack of availability, lack of relevant criteria in terms of financial hardship or relevant pathway

Doulas Without Borders leadership team reserve the right to withdraw our services from anyone deemed to be misusing the service, having unfairly gained access to the service, or should the service user have had a change in circumstance which has not been reported.

**Doulas Without Borders – Environmental Policy**

Doulas Without Borders are committed to sustainable solutions in all aspects of our work.

Doulas Without Borders are committed to using electronic documentation, forms and storage solutions wherever possible to limit our use of paper.

We offer you this document as a means to ensure you have a hard copy for access of reading and to receive a signature afterwards and we will issue some guidance paperwork for DBS checks, but almost all other documentation, including evaluation sheets and active doula forms will all be done online, to avoid any further use of paper. We also ask that you keep this booklet safe and make notes elsewhere, so that you can return this booklet to us for re-use. Thanks.

Doulas Without Borders encourage our volunteers to work in environmentally conscious and sustainable ways.

Doulas Without Borders seeks to review all environmental issues that impact upon the organisation, through environmentally conscious auditing carried out by the leadership team.

**Lone Working Guidance**

**Definition:**

Lone working applies to anyone who works away from the physical presence of other colleagues, without close or direct supervision.

Examples might include:

• working alone on premises, or in a client’s home,

• working outside normal ‘office’ hours on their own,

• visiting domestic and commercial premises without a colleague.

**DWB lone worker objectives:**

To identify lone working situations and enable doulas in such situations to assess the risk and take suitable precautionary measures.

To support doulas to identify a safe system of work which may include:

• Recording and relaying the whereabouts of doulas to a community elder,

• Recording and relaying when working begins and ends,

• Keeping information confidential, but so that it does not jeopardise the doula’s safety. • Following an agreed system for locating doulas who deviate from the expected movement pattern, such as alerting a co-worker,

• Minimising the occurrence and risks of lone working, when there is perceived risk involved. **Your personal responsibilities:** Responsibilities for your personal safety are as follows:

• Doulas take personal responsibility for their own safety and well-being and make this a priority of practice

• Until a relationship with client/s has developed, doulas should ensure that lone working and all possible vulnerable situations are avoided for as far as reasonably practical

• Emergency procedures should be put in place so that individual doulas working alone know how to obtain assistance (e.g have the name and number of a community elder)

• Arrangements should be in place so that someone else is aware of the doula’s whereabouts at all times, including when lone working starts and finishes.

**Lone working doulas are advised to:**

- Consider their own personal safety at all times

- Take reasonable steps to ensure their own safety,

- Inform their colleagues/elder of any incidences or safety concerns.

-Consider a location sharing app such as google maps.

All lone working doulas need to take personal responsibility for the health and safety of themselves and of others who may be affected by their acts or omissions at work. This may include, but is not limited to, driving clients to appointments or hospital.

It is very important that no lone working Doula puts themselves in danger or is required to do something that they feel is a danger or risk to themselves or others.

If in any doubt about a lone working situation, leave the situation straight away, wait for others to accompany you or delay your visit or situation. Never let others, regardless of their seniority, put you in a situation in which you feel uncomfortable or unsafe. Call an elder immediately.

**General guidance for all members:**

It is recommended that lone working doulas:

- Carry mobile phones when out on visits to all appointments,

- Keep diaries up-to-date with details of appointments, ensuring whereabouts are known,

- Ensure that a friend/ family member is aware of the movements for the day and what time they are expected home after their last appointment

- Maintain contact with elder/colleagues by arrangement, particularly if carrying out visits out of hours

- Text / email elder/colleagues when arriving at a birth, if involved with a transfer and on arrival home.

**Travel:**

To reduce potential risk to personal safety, it is recommended that volunteers:

-Ensure someone knows and can easily determine their whereabouts and expected time of return home,

- Try to use the same known travel routes where possible avoid any isolated areas,

-Carry out your antenatal/postnatal work during daylight hours wherever possible and carry a torch for travelling after dusk

-When preparing for travel at night make sure you carry equipment in your car if you breakdown (such as warm clothes, blankets, snacks etc)

-Carry the minimum of valuable personal belongings when travelling

-Always stay alert and get help as quickly as possible if concerns about safety develop, • Consider personal safety of yourself and others when driving if you’ve been awake for a long period,

- If travelling on foot, try to walk with to someone else and be as visible as possible

-If travelling by public transport, sit near the driver to be able to raise any concerns about personal safety

- If travelling by car, keep the doors locked when you are in the car. Park your car in a well-lit area.

-Have car keys ready when returning to your car, to avoid having to fumble for them.

-If you are worried and feel threatened, do not leave the car unless it is absolutely necessary; drive to a police station or garage forecourt to seek help

-Always take a common-sense approach and pay attention to your gut feeling. **Visits:**

It is recommended that lone working doulas:

- Arrange initial visit in a neutral, public place

-Be assertive about any personal safety issues

-Read the signs as early as possible. If a potentially dangerous situation develops, you should leave as quickly as possible. Do not attempt to referee a domestic conflict situation

-Contact the relevant emergency services if necessary

-Consider if there are any child protection implications – you can find guidance on this here: https://www.gov.uk/report-child-abuse

-Discuss an incident immediately with your elder and seek support and guidance for your own needs.



Volunteer Agreement

This is a description of the arrangement between you, the volunteer, and Doulas Without Borders (DWB) in relation to your voluntary role. You will receive a different Volunteer Agreement to sign upon your acceptance as a new member.

We, DWB will do our best:

-To recruit and offer training to all team members towards adopting best practices

-To introduce you to how the organisation works and your role in it and to provide any training you need

-To try to swiftly resolve any problems, grievances and difficulties you may have while you volunteer with us.

As a volunteer we expect you to:

-Keep to the agreed volunteer role

-Undertake activities with the agreements and within expressed guidelines/boundaries

-Work in partnership with other people in the Organisation

-To inform the team if you are unable to attend the placement for any reason.

-Agree to maintain the privacy and confidentiality of all information including, and in particular, client identifiable information

Agree to abide by the Confidentiality, Safeguarding and all other procedures within this handbook.

Please note:

DWB does not accept responsibility for loss or damage to your personal property. DWB does not accept any liability for your practice.

**What next?**

➢ *Never be afraid to ask questions*

➢ *Spend plenty of your time listening*

➢ *Offer realistic and individualised support*

➢ *Ask permission for touch always and don’t presume*

➢ *Ask permission from your client for sharing anything confidential outside of DWB*

➢ *Signpost to local and relevant services...and be prepared to make the call (when you have permission) and introduce your client, before passing phone over*

➢ *Download Whatsapp to communicate with colleagues*

➢ *Use your clients initials* ***only*** *when communicating information*

➢ *Retain good boundaries and don’t overextend your offers…or your expectations* ➢ *Send client evaluation (doula debrief forms and care plans) back to us*

➢ *Utilise your Doula community, debrief and co-support.*

Should your client be moved or cease to want your support whilst you’re still working together, contact Leadership Team immediately.

**Stay safe-** let another Doula know where you are

S**tay well**- debrief and practice self-care

**Stay in touch**- communicate with the team to let us know if you need anything.

**Thanks for reading and we will be in touch soon with either:**

- a request for an interview

-a thanks but we are not able to process your application at this time

- a no, we’re sorry to say that you haven't made it to the next round.