
Counselling Service Provision Policy

KWARAS

Kildare West Wicklow Community
Addiction Services Ltd.

Approval date: 28.10.11

Revision date: 28.10.12

1. Responsibility for approval of policy	<i>Board & management committee</i>
2. Responsibility for implementation	<i>Management & Staff Team</i>
3. Responsibility for ensuring review	<i>Management & Staff Team</i>

1. Policy Statement

- 1.1. KWARAS is committed to ensuring that counselling provision adheres to the ethical standards and practices outlined by the IACP/IAAAC/IAHIP in regards to all service user interactions.

2. Purpose

- 2.1. The purpose of this policy is to provide staff with guidance on counselling practice within KWARAS that ensures competence, professional responsibility, and integrity.
- 2.2. To ensure that respect for the rights and dignity of clients is upheld.
- 2.3. To define clearly the roles of clinical practitioner, manager and clinical supervisor.

3. Scope

- 3.1. The policy outlines the steps to be undertaken by all staff and volunteers consistent with the IACP or IAAAC Code of Ethics and Practice.
- 3.2. This policy applies to other one-to-one supports such as addiction supports, relapse prevention work, key working and case reviews. .
- 3.3. This policy should be read alongside the service's Confidentiality Policy, Code of Conduct and Complaints Procedure.

4. Principles

- 4.1. KWARAS affirms the following ethical principles:
 - 4.1.1. Respect for the rights, privacy and dignity of the client. In all interactions, clients will be treated as persons of intrinsic worth with a right to determine their own priorities.
 - 4.1.2. Competence. The service will ensure that the professional skills of counsellors are monitored and developed on an ongoing basis. Counsellors should always and only work to the level of their knowledge and competency.
 - 4.1.3. Responsibility. Counsellors will act in a trustworthy and reputable manner towards clients and the community.
 - 4.1.4. Integrity. Counsellors will treat others in a fair, open and straightforward manner, honour professional commitments, and act to clarify any confusion about their role or responsibilities.

5. Statement of Approach

- 5.1. The organisation utilises an integrative approach / working method in relation to the delivery of counselling services: This allows for a variety of approaches like person centred, cognitive and or psychodynamic approaches to be used to best fit the needs of the clients.

6. Glossary of Terms and Definitions

- 6.1. Counselling: the term 'counselling' includes work with individuals, pairs or groups of people usually referred to as 'clients'. Counselling may be concerned with developmental issues, addressing and resolving specific problems, making decisions, coping with crisis, developing personal insight and knowledge, working through feelings of inner conflict or improving relationships with others. Only when both the user and the recipient explicitly agree to enter into a counselling relationship does it become 'counselling' rather than the use of 'counselling skills'. It is not possible to make a generally accepted distinction between counselling and psychotherapy. Regardless of the terms used, the following ethical issues addressed in this policy are common to all counselling situations.
- 6.2. Management supervision: is the role of the manager of the counselling service where the care and through put of clients within the service is discussed with counsellors. It is to ensure the duty of care and equity of service provision to clients.
- 6.3. Clinical supervision: is provided by an appropriately trained counsellor and aims to improve client care, to develop the professionalism of clinical personnel, and impart and maintain ethical standards of counselling. Quality clinical supervision is founded on a positive supervisor-supervisee relationship that promotes client welfare and the professional development of the supervisee. In

the context of counselling clinical supervision encompasses a number of functions concerned with monitoring, educating, developing and supporting individuals in their counselling / psychotherapy work while addressing an array of psychological, interpersonal, and physical issues of clients in order to ensure that clients are competently served. Working as an addiction counsellor may require competencies in individual, group and couples counselling. Supervision is aimed at supporting the development of knowledge and skills in each of these areas. The clinical supervisor should be external to the service. Refer to section 7, for further details.

7. Roles and Responsibilities

- 7.1. Management are responsible for:
 - 7.1.1. Ensuring that counsellors are engaged in ongoing adequate external supervision and that ethical standards are maintained throughout the counselling work and that it is conducted in an appropriate setting.
 - 7.1.2. Requesting copy of counsellor's current Professional Indemnity Insurance Certificate and holding this on file.
 - 7.1.3. Completion of reference checks prior to commencing counselling within KWARAS.
 - 7.1.4. Developing clear outcome measurement to monitor the effectiveness of counselling services. This will be met through regular case reviews.
- 7.2. Supervisors are responsible for:
 - 7.2.1. Ensuring that the relationship between supervisee and client is maximised to enhance its therapeutic effectiveness.
 - 7.2.2. Monitoring and supporting the supervisee in the counselling role.
 - 7.2.3. Enabling the supervisee to develop and enhance professional skills and abilities through reflection and exploration on the work.
 - 7.2.4. Ensuring that ethical standards are maintained throughout the counselling work and that it is conducted in an appropriate setting.
- 7.3. Counsellors are responsible for:
 - 7.3.1. Ensuring that all practices adhere to the standards outlined in this policy, and to standards identifies in the IAHIP/IACP / IAAAC Code of Ethics and Practice.
 - 7.3.2. Provide evidence of current Professional Indemnity Insurance coverage.
 - 7.3.3. Engage in ongoing adequate external supervision.
 - 7.3.4. Maintain accurate, confidential files of clinical practice. Provision for secure onsite storage of counselling files will be accommodated and accessed in the ground floor office in Celbridge.
 - 7.3.5. To participate in regular case reviews (inclusive of contracted hours).
 - 7.3.6. Attend to self-care and further professional development.
 - 7.3.7. Contribute to and safeguard the good reputation of the service in all dealings with external agencies.
 - 7.3.8. To operate within all the policies, procedures, guidelines and code of ethics as stipulated by KWARAS and your own professional regulating body.

8. Qualifications

- 8.1. In order to undertake work with KWARAS as a counsellor the individual must have a qualification recognised by the IAHIP/ IACP / IAAAC or other equivalent.
- 8.2. Supervisors should have the following credentials: an IACP/IAHIP/ member who has been accredited for a minimum of 5 years and working as a counsellor for the 5 years previous to taking on the role of supervisor, or a full member of another recognised counselling body for a minimum of 5 years and working as a counsellor for the 5 years previous to taking on the role of supervisor **having** successfully completed 40 hours training in supervision.

9. Assessment & Counselling Referral/Treatment Status

- 9.1. Initial assessment of person's presenting to KWARAS Services is carried out by a key worker. Where initial contact is made with the counsellor, the counsellor will direct individual's to contact a key worker to begin the assessment process. This can be through provision of KWARAS business cards (containing landline numbers for Celbridge and Newbridge offices), or providing the key worker's work mobile number.
- 9.2. On completion of assessment, where the need for counselling is identified, the client will be referred into the KWARAS counselling service.
- 9.3. The referral is recorded, noting client's name, contact details and date of referral. Where a counselling space is not available, the client will be placed on a waiting list. Shared access to the counselling service waiting list will be in the ground floor office (Celbridge).
- 9.4. Referrals on the waiting list will be discussed and prioritised on an individual basis at case review. Factors considered for such are: referral date, age, family situation, treatment status (i.e. Cuan Dara), engagement to date, ability to commit to counselling process and crisis intervention.
- 9.5. KWARAS counselling service is a time-limited counselling and referral service. A maximum of eight sessions are offered to clients. As KWARAS aims to be a flexible service, subsequent revisions of these terms can be accommodated in exceptional circumstances. Where such a situation arises it is presented for review and agreed in advance of any change. The final decision to revise existing terms rests with the keyworker.
- 9.6. Where the need for specialist counselling service is identified, this will be reviewed by team and appropriate referral made (i.e. Hope, One in Four, Rape Crisis Centre, Young People Services, Family Support, Pieta House). This will involve enhancing networks with other specialist services. An updated directory of such services including referral criteria and documentation will be compiled and held onsite for reference.
- 9.7. Appointments for KWARAS counselling service operate between the hours of 9am to 4pm in the Celbridge location, unless otherwise agreed.
- 9.8. A counselling diary system is operated to ensure efficient room usage and communication within the centre. Counselling appointments are entered into the diary and appointed to set days. Entries should show date and time of appointment and indicate room requested. Room booking in advance is requested. This can be facilitated through checking the diary and entering appointment where there is availability. The counselling diary is securely located in the ground floor office (Celbridge), with shared access for the team.
- 9.9. Any changes in counselling appointments i.e. cancellations, rescheduling etc will be facilitated through the counselling co-ordinator. Clients are asked to contact the co-ordinator re such changes. The co-ordinator will liaise with counsellors re amendments in this regard and update the counselling diary. To minimise this occurrence key workers will contact clients the day before their counselling appointment as a reminder service. This service will be outlined in the client contract.
- 9.10. Key workers encourage clients engaged in counselling to give advanced notice of cancellations. Where an advanced cancellation is made, the co-ordinator can offer this space to another client.
- 9.11. Clients will be informed that if two consecutive appointments are missed without contact or reasonable explanation, they forfeit their counselling space by route of self-discharge from this service.
- 9.12. Case reviews take place with counselling and key working staff to discuss new referrals, prioritise waiting list applicants and review current client status and progression. Shared confidentiality enables the team to be aware of issues facing clients', enabling other staff to offer interim support should the client's counsellor/key worker not be available. It allows for support and guidance to team members and clients indirectly benefit from the combined experiences of the team. Clients are informed of shared confidentiality through discussion of client contract.
- 9.13. The terms on which counselling is being offered should be made clear to clients before counselling commences. This will be facilitated by the key worker, in reviewing the client contract with each person prior to entering counselling. Each client is asked to sign this contract if they are in agreement with the conditions presented.

10. Respect for the Rights and Dignity of the Client

- 10.1. Clients should be made aware that the counsellor is acting under a code of ethics, which includes a structured complaints procedure which clients have access to.
- 10.2. Counsellors will ensure clients are treated equally in regards to gender, sexual orientation, disability, religion, race, ethnicity, age, national origin, party politics, social standing or class.
- 10.3. Counsellors will at all times show appropriate sensitivity to social customs and cultural expectations.
- 10.4. Work will be conducted in ways that promote the clients personal autonomy.
- 10.5. Work will be conducted in such a way as to promote the privacy and confidentiality of the client:
 - 10.5.1. Client counselling sessions will be in a venue that is appropriately confidential. Care will be taken to ensure:
 - 10.5.1.1. Rooms are adequately soundproof and without distraction.
 - 10.5.1.2. Waiting areas are reasonably private, the potential of clients meeting other clients is minimised.
 - 10.5.2. Counsellors will adhere to the organisations Confidentiality Policy. On their first visit, the key worker will inform clients of the organisations Confidentiality Policy and circumstances whereby confidentiality may be extended (to include project confidentiality re case reviews/recording).
 - 10.5.3. The counsellor will make it clear how much information, if any will be shared with other members of the organisations team.
 - 10.5.4. In the circumstance that confidentiality is extended, and where feasible, practitioners shall endeavour to obtain the client's consent. The worker will consult with their supervisor or a manager within the service, in advance of any such disclosure.
 - 10.5.5. All staff files will be handled according to the organisations Data Protection Policy.
- 10.6. The client's consent should be sought for the following:
 - 10.6.1. To participate in counselling (the clients right to discontinue counselling at any time should be stated and honoured).
 - 10.6.2. In any the situation where a counsellor might act on behalf of a client.
 - 10.6.3. When conferring with other professionals external to the agency, as part of an agreed care plan.

11. Competence

- 11.1. Counsellors will be fully aware of the IAHIP/ IACP / IAAAC Code of Ethics and Practice.
- 11.2. Counsellors are committed to carrying out professional activities only for which they have the professional competency to practice.

12. Dual Relationships and Boundary Issues

- 12.1. The counsellor should also work in line with the Code of Conduct for all staff within the service.
- 12.2. Dual relationships can occur at two levels: between supervisors and supervisees and between counsellors and clients. A dual relationship occurs in supervision when a supervisor has a primary professional role with a supervisee and at an earlier time, simultaneously or later engages in another relationship with the supervisee that transcends the professional relationship. There are varying degrees of harm or potential harm that might occur as a result of dual relationships and some negative effects of dual relationships might not be apparent until later. It is the responsibility of all counsellors and supervisors to set and monitor appropriate boundaries in relation to this. Any concerns of boundary issues should be raised with the service manager.
- 12.3. Relationships with clients should be limited to a therapeutic setting and all social contact between a counsellor and client should be avoided. A counsellor should never enter into a sexual relationship with a current or former client.
- 12.4. A counsellor should never accept their friend or family member as a client.

- 12.5. It is the responsibility of the supervisor to help supervisees recognise and manage boundary issues.
- 12.6. It is the responsibility of all counsellors to refer clients to other services as appropriate.

13. Integrity

- 13.1. Counsellors should recognise their own professional limitations and engage actively in self care activities to avoid 'burnout' and other conditions which could affect their professionalism.
- 13.2. Counsellors should receive regular supervision in proportion to their amount of client work.
- 13.3. Counsellors should avoid conflicts of interest that may affect their relationship with the client. If such conflicts emerge, staff should inform the Manager at the earliest possible convenience.
- 13.4. All reasonable steps should be taken to ensure the client's safety whilst they receiving counselling.

