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**Text

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**Code of Practice: Counselling Policy and Procedure**

**Introduction**

Breaking the Silence (BtS) has produced this Code of Practice for potential and current clients as a guide to using the Counselling Service. Rather than a set of rules the code should be seen as a flexible framework of good practice. If clients find anything in the code which is not helpful or which would be disadvantageous to them they are invited to discuss their concerns with Imran Manzoor, our Service Lead.

**Mission Statement**

The counselling service supports racialised men and boys who have experienced sexual violence, so that they may overcome the trauma, feel safe and fulfil their potential.

**Confidentiality**

The identities of people who contact the BtS and the information they provide is held by the counselling service and is not normally disclosed to other people. The circumstances in which the BtS might disclose identities or information is as follows:

1. Counsellors have an ethical obligation to discuss client material with their clinical supervisors (see supervision policy) but usually client identities are not disclosed in supervision.
2. Clients may request that the BtS discloses some or all of the information.
3. If the BtS is concerned about the life or safety of anyone, a limited disclosure of information may be made, usually only after a discussion with the client.

**Requirements for Counsellors**

To have a DBS check from the Meridian Centre and have two references from previous or current employers and to undergo a 3 month probation period as per Meridian Centre’s safer recruitment policy & trial period procedure.

At minimum, be in, or have completed counselling training on a BACP or NCS accredited counselling course and have approximately 150 hours of supervised clinical counselling.

To be a member of B.A.C.P or equivalent professional body who’s codes are maintained.

In meeting these standards you will be covered by Meridian Centre’s professional indemnity insurance.

A copy of your qualifications and DBS will be kept on file alongside your supervision record. These are available to clients should they wish to see evidence of your competency and qualifications.

**Practice Guidelines**

Practice according to humanistic and integrative theoretical models and to short term contract work, which will be for up to 52 weeks with each client. Sessions are to be offered according to need and will be assessed as counselling progresses, within the sessions with the client and then by Head of Service, Imran Manzoor.

To attend regular anti-racist practice workshops and seminars delivered by BtS Head of Service or by Diversity Matters.

To continue with ongoing personal therapy whilst working for BtS and to attend personal therapy as per terms of counselling training course.

To have attended an interview with a BtS panel and all paperwork as per BtS safer recruitment policy to have been completed.

To abide by BtS policies and guidance given by the BtS Head of Service, Imran Manzoor and Clinical Supervisor, Paul Buckley.

To attend induction meeting, quarterly meetings with the BtS team, and exit sessions upon leaving the project.

To have read and signed BtS policy and procedure agreement form and staff handbook.

**Making contact & appointments**

**Making contact**

The BtS phoneline operates 24 hours. This is unmanned and requires a message to be left. Messages are checked twice daily by our Service lead. Our website enables clients to self-refer using the Electronic Registration Formwhich, when completed, will only be read by one of our qualified counsellors. Clients are then contacted to assure them we have received their voicemail/application.

**Making and changing appointments**

1-1 counselling appointments are usually no more than 50 minutes long. When clients ring to request an appointment they are asked to ‘Register’ by completing an Electronic Registration formwhich can be accessed through our website and sent to a confidentially secure site. The form is accompanied by relevant information about how your information will be handled. A hard copy of the Electronic Registration form can also be collected from the Meridian Centre reception and filled in by hand, or the registration form can be completed by the client and counsellor together at an assessment (first session) if for example a client felt too upset to complete it on their own. We ask each counsellor and clients to use our encrypted messaging service to book each appointment and a reminder message to be sent if agreed to each client no less than 48 hours before the next appointment.

Where an agency is referring an individual, this is to be done via the referral form on our website. This is to be sent using an encrypted means or via a password protected file. Passwords must be provided verbally over the phone. A hard copy of the referral form can be collected from the Meridian Centre reception and filled in by hand. A copy of a risk assessment but be provided alongside the referral form. BtS staff will liaise with referring agencies to ensure adequate information has been provided.

Questions about preferred means of contact i.e. email or telephone and suitable times for counselling intends to offer best service and are needed to ensure appointments can be made with a minimum of delay. Clients who have greater flexibility often end up waiting less time before they get to see a counsellor. Clients are also asked if they have any special needs or preferences that would enable best use of our counselling service. During the busier times of the year there is a waiting list but we will do our very best to see clients as soon as possible and also offer a Drop-In’ service should waiting for an initial appointment prove too difficult to wait for.

Once a client has made contact with BtS either by telephone or email an appointment will be offered as soon as possible and most of the time an initial appointment to see a counsellor is available within two or three weeks of a request being made. Our Drop-In service runs after Jummah prayers (Fridays). Drop-In can also be accessed when clients have concerns about others or wish to understand the counselling process before they decide to engage with one of our counsellors for ongoing sessions. One off crisis counselling is also offered in this period.

Appointments can if necessary, be rescheduled or cancelled and if this is done with as much notice as possible it allows the time to be offered to someone else. When a client does not attend their appointment and have left no message about a cancellation they are sent an email to let them know their session is no longer available to them the following week. However, in consultation with a supervisor, fragile clients or those At Risk can be contacted to see if they would like a further appointment with the same or other counsellors should they wish. If the person later seeks another appointment, they may have to join the waiting list.

**Amount of counselling & asking for another counsellor**

**How much counselling**

We offer 52 x weekly 1-1 counselling sessions of 50 minutes for both face to face and online therapies. Some may choose to join a rolling 12 week group programme, with a weekly 90 minute session. Here you will meet other survivors, who will undoubtedly feel as nervous and uncomfortable as you. Clients may leave sooner having resolved their issues and developed means for dealing with the discomfort they have experienced; for others the memory no longer arouses the same distress. Clients and counsellors review the progress of counselling and work together towards an appropriate ending.

**Asking for another counsellor**

Clients and counsellors do not need to have a strong liking for one another although this does often happen, but it is important the client and counsellor can make an effective psychological connection as this forms the basis of the counselling relationship.

If clients find that there are difficulties in the working relationship with their counsellor and feel unable to talk to their counsellor about this, they can ring our CEO Shamim Khan and ask to work with someone else. In rare circumstances a client or counsellor may find it inappropriate to start or to continue working together and, in these circumstances, an alternative counsellor can always be found.

**Clients right to choose gender of therapist**

Upon receiving a new referral, clients are to be offered a choice of support worker for their initial assessment. In the course of the assessment and contracting, clients are offered the choice of gender for their therapist. For outsourced therapists through partners, all therapists wishing to work with male survivors must present:

* Qualifications (Level 4 minimum) in one of the recognised schools of psychotherapy
* Membership of a governing body e.g. BACP, BABCP
* Evidence of clinical supervision by a certified clinical supervisor - a mimimum of 150 hours
* A minimum of 3 years experience of trauma informed work
* A working knowledge and some experience of delivering CBT based directive psychotherpies
* A minimum of 12 months experience working with victims of sexual abuse, historic and current
* An understanding of the impact of sexual abuse on men – the psychopathologies related to gender and the barriers to help seeking
* An understanding of how racialised men experience multiple forms of discrimination
* A sound understanding (established through interview) of the issues impacting men from racialised communities and how said issues impact avoidance and help-seeking. This should include:
  + Biraderi system
  + Understanding of Hya, sharam and izzet
  + Jinn possession and Dissociative identity disorder
  + Honour based abuse
* A copy of your qualifications and DBS will be kept on file alongside your supervision record. These are available to clients should they wish to see evidence of your competency and qualifications.

**Complaints**

**If a client has a complaint**

If a client is unhappy about the service they are receiving or perhaps unhappy about something they are not receiving, they are invited to discuss this with their counsellor. If this is not possible or if having discussed it with the counsellor they are still unhappy they are invited to discuss their concerns with the Service Lead.

Many difficulties can be resolved before the stage of a formal complaint and often what starts as a misunderstanding, if left unresolved, can become more difficult to rectify so clients are encouraged to discuss any concerns at an early stage.

Meridian Centre has number of procedures which staff and members of the public can refer to:

* Equal opportunities
* Harassment Policy
* Grievance Procedure

The British Association for Counselling and Psychotherapy (BACP) investigates complaints made against counsellors who are members of that organisation. All counsellors in the BtS adhere to the Ethical Framework for Good Practice in Counselling and Psychotherapy and all counsellors are members of BACP or another similar organisation.

**Ethical Framework**

The British Association for Counselling and Psychotherapy (BACP) 15 St. John’s Business Park, Lutterworth, Leicestershire. LE17 4HB. (Tel. No. 01455 883300) produces an Ethical Framework which covers the work of the UCS. Three of the main aspects of the ethical framework are briefly mentioned here. The full document can be found at [www.bacp.co.uk](http://www.bacp.co.uk)

**Relationships**

It is considered inappropriate for counsellors to enter into counselling relationships with clients with whom they already have or have had some other form of relationship. Similarly counsellors are discouraged from entering into personal relationships with people who are or who have been clients. These principles are promoted to reduce the potential for exploitation of clients and former clients.

**Individual support plans**

It is imperative that male survivors ‘own’ this process. The abuse may have taught them that they do not deserve to be treated with care or respect. They may comply with the wants of the therapist, possibly stemming from a time when it felt dangerous to disagree with abuser. Trauma can lead to disempowerment and disconnection – their needs, wishes and choices have been trampled on.it is important we do not repeat this in therapy.

An individual support plan, using our existing proforma will be developed collaboratively with the client to ensure we remain focused on the goals he identifies. The therapy programme, the rational and content, must be explained and only implemented with his consent/approval. This will be reviewed at 3 monthly intervals to determine progress against stated outcomes, collaboratively developing areas for further improvement based on any new goals he may have identified for his growth and healing.

**Supervision**

All counsellors who are working with clients are expected to engage in clinical supervision. The supervisory relationship provides an element of counsellor accountability which helps to protect clients from incompetent or unhelpful counsellors. The supervision also provides supportive and developmental opportunities for the counsellor. Supervision enables a counsellor to work more effectively with clients.

Clinical supervision is provided by Paul Buckley, lead therapist at the Bradford District Care NHS Foundation Trust – MA in psychoanalytical studies; MSc Systemic and Family; EMDR, ACT, CBT. Masters Level Supervision (Trust Supervisor trained).

A contract will be agreed between the counsellor, Clinical Supervisor and BtS Head of Service, for the latter to receive a supervisor report to ensure that the counsellors conduct is adhering to best practice/BACP/ guidelines.

Counsellors must attend a minimum of 1.5 hours per calendar month regardless of number of contracted clients. This can be a mix of one to one, peer, telephone and online, as all these count for accreditation.

Trainees must attend Minimum of 1.5 hours per calendar month, with a ratio of 8 hours counselling to 1 hour supervision, with supervision every two weeks. This can be a mix of one to one or group (when the counselling team has more than 3 staff members). Paul Buckley will facilitate group supervision. Peer supervision is not acceptable for students.

Paul Buckley will have oversight of all support plans, as well as working with the Head of Service to monitor and supervise case loads.

**Signposting**

If it is determined that Breaking the Silence is unable to the clients needs identified through assessment, it is the resoinsibility of the staff member/counsellor, with support from experienced staff, to signpost the individual to an appropriate support service through our professional networks. Only organisations with whom we have a formal information sharing agreement should be used. With any new agencies, please ensure the agreement is approved by the Head of Service. A list of key agencies:

1. Bradford District domestic abuse and sexual violence information: <https://bradford-dasv.co.uk>

2. Bradford Rape Crisis & Sexual Abuse Survivors Service; Tel: 0800 448 0710

3. Independent Sexual Violence Advisor

3. Victim Support; Victim Support, Unit 3 Park View Court, St Pauls Road, Shipley, West Yorkshire, BD18 3DZ; Tel: 01274 532216

4. Sexual Assault Referral Centres (<http://www.rapecrisis.org.uk/Referralcentres2.php>) for details on SARCs and to locate your nearest centre.

5. Broken Rainbow (tel: 08452 604460 / web: www.brokenrainbow.org.uk) for advice for GBT victims) for advice and support for GBT victims of domestic abuse.

For legal support:

1. Dino Nocivelli, Partner, Leigh Day, Panagram, 27 Goswell Road, London, EC1M 7AJ; Tel: 020 7650 1397 Fax: 020 7253 4433 DX 53326 Clerkenwell
2. SKB Lawyers; Hope Park, Trevor Foster Way, Bradford, BD5 8HB., 01274 727373 (by appointment) info@skblawfirm.co.uk
3. The Forced Marriage Unit (FMU) is a joint Foreign, Commonwealth and Development Office (FCDO) and Home Office unit: 020 7008 0151

Specialist Support for men:

1. National Male Survivor Helpline and Online Support Service: 01926 402 498
2. Men Standing Up; Housing & Support to All Men Who are Victims of Domestic Abuse: 0300 303 0167
3. Safeline – Preventing sexual abuse & rape & supporting those affected: 6a New Street, Warwick, CV34 4RX; Tel: 01926 402 498; Direct Line: 07528 357 518

Male Helpline: 0808 800 5005; Young People’s Helpline 0808 800 5007; E-mail: Website: www.safeline.org.uk

1. Registered charity No: 1070854
2. Karma Nirvana: South Asian run service for victims of Honour based abuse 0800 5999 247
3. ‘Honour’ Helpline (tel: 0800 5999247) for advice on forced marriage and ‘honour’ based violence.

**Risk and Needs Assessment**

A risk and needs assessment is carried out for the clients safety and protection. This is to be completed collaboratively with the client. All adults have the right to be safe from harm and should be able to live free from fear of abuse, neglect and exploitation. All staff, volunteers and trustees working on behalf of Breaking the Silence (Meridian Centre) have a duty to promote the welfare and safety of those we engage. This in line with our obligations under the Human Rights Act 1998, the Mental Capacity Act 2005, Public Interest Disclosure Act 1998 and the Care Act 2014.

The findings of this risk assessment may require an intervention via a referral to the local Marac, Bradford Adults Safeguarding Board or Children’s Services.

**Number of Clients**

As agreed with and BtS Head of Service and capacity of each counsellor. For volunteer placements this will be in accordance with their course requirements.

**Referrals**

All counselling assessments are to be done by a qualified counsellor and the BtS Counselling assessment form is to be used.

Handovers for each client are to be done via telephone, face to face or via secure email. The counsellor will then make contact with the client to initiate a first meeting.

**Holidays**

All holidays to be booked in with BtS Head of Service or and to give a minimum of 2 weeks’ notice.

**Sickness or absence**

The counsellor is to speak to a staff member to inform them that they are unable to work due to illness. The counsellor or BtS will inform the client if they are unable to be seen for their next appointment. The counsellor will be responsible for contacting the client to arrange their next appointment if only 1 appointment is missed. If the counsellor is unwell for a longer period of time BtS Head of Service will be responsible for communicating with the young adult.

**Travel Expenses**

Expenses can be claimed for items that have been pre-agreed by one of the managers. Expenses to be claimed as per staff handbook and must be submitted monthly.

**Invoicing/payment terms**

For sessional counsellors that are waged, invoices are to be submitted monthly to the BtS Head of Service to be paid within 28 days.

BtS pay £18 per hour for counsellors, including write up of sessions.

Payment for further administration and meeting attendance to be negotiated in contract with BtS

Trainee counsellors are seen as volunteer staff, but contributions up to clinical supervision and some CPD courses are paid by BtS.

**Use of mobile phone**

We ask each contracted counsellor to use the work mobile phone for communication with clients.

Counsellors to be clear in their contract with clients that encrypted messaging service is for communicating around appointments and if any other needs arise around counselling they are to bring it to their sessions or to discuss with BtS staff.

**Training**

Counsellors that work or volunteer with BtS are a valuable asset to our service and as part of our commitment to you, we encourage & support your CPD as a practitioner. We offer courses in the form of Induction sessions, mandatory trainings (e.g. Safeguarding, Equality & Diversity, Health & Safety), and other CPD events particularly relating to our clients.

We believe in and encourage a community of learning and sharing best practice amongst our all our counsellors through quarterly meetings and group supervision may be offered when the counselling team has more than 3 staff members.

**Personal Qualities of Counsellors**

Counsellors will be keen to develop some or all of the following qualities as they grow in experience:

|  |  |
| --- | --- |
| * Empathy | * Humility |
| * Sincerity | * Competence |
| * Integrity | * Fairness |
| * Resilience | * Wisdom |
| * Respect | * Courage |

The absence of one or more of them does not in itself mean that the counsellor is not a good counsellor. Each counsellor will have different levels of some or all of these qualities and they are seen within the counselling profession as worthy of pursuit.

**Publicity**

The Breaking the Silence project upholds the ethical principle of Justice through its equal distribution of services. The BtS subscribes to and enforces equality of opportunity through its publicity material and advertisement protocols as we advertise our services extensively across our working context. This is accomplished by providing informational leaflets and brochures clearly and specifically outlining the services which BtS offers to clients, and how clients may access such services.

Part of our commitment to fairness and the upholding of equality of opportunity are realized through publicising our services to specific sections of our communities; we are aware of a need to target all those at risk and do our best to encourage their attendance by appropriate advertising.

BtS provides a good standard of practice and care by producing publicity material which takes into consideration the awareness of its working context. We provide an informational leaflet explaining the nature of “Processing Personal and Sensitive Information.” The information provides clear rational and methodology of why and how client information is maintained in line with the Data Protection Act and how information relating to client demographics is recorded.

BtS counsellors take responsibility for clarifying the terms on which their services are offered in advance of a potential client entering into a counselling contract. This has been accomplished in the form of counsellors giving induction presentations and informational talks about the nature and purpose of the BtS to various groups in its working context. Our presentations are transparent, accurate and are consistent with maintaining the good standing of the profession.

The counsellor and client are to negotiate a counselling contract at the start of each session to assist both counsellor and young adult in best outcomes for each session. The contract acknowledges the commitment to the young adult by demonstrating accountability, aims to maintain integrity and help build an appropriate relationship with clients (BACP Ethical Framework for Counselling Professions)

In all of this we aim to concretely ensure the fair and adequate provision of our services with the guiding ethical principle of justice as can be seen in all of our publicity and advertising literature.

**Staffing**

The Service Lead is a full time practitioner and a Member of BACP, and holds overall clinical responsibility for the Service. All the counsellors working in the Service are required to support the Service Lead in carrying out best practice through their commitment to working in ways that are: underpinned by the BACP Ethical Framework, described in the BtS Code of Practice; subject to appropriate change and development as determined either by the Lead.

The Service Lead is responsible for inducting all counselling and clerical staff within the BtS. Before client work commences particular attention is given to health and safety, and Service systems / procedures. All BtS staff are required to maintain regular and ongoing training and development which consists of a mixture of institutional-orientated activities along with counselling-specific activities. Some of the latter training activities lead to formal qualifications while others are one-off workshop type events.

An agreed counsellor job description, person specification, and recruitment procedure as agreed with and monitored by Meridian’s Trustees/Directors, are used in the recruitment of paid permanent and temporary staff. Volunteer counsellor recruitment is not subject to the Meridian Centre’s formal recruitment protocol. None the less, volunteers are assessed, interviewed and selected in a similar way.

**Placement Scheme for Trainee and Associate (qualified to Diploma level) volunteers.**

BtS supports the need for student counsellors to be able to gain appropriately contracted and supervised counselling practice.

BtS works within two fundamental ethical principles which govern the gaining of counselling experience. The first being the safety of both clients and volunteers and the second is the needs of our client base.

The referral route for clients is considered to be a task deserving of thoughtful and timely resources and the Service lead and another team member work together each day to consider the appropriateness or not of client referral for trainees.

BtS works to support the trainee/associate volunteer by providing a safe and ethical framework which focuses on accountability for the counselling work; supervision arrangements; assessment requirements and confidentiality issues. There is a written contract between BtS and the training organisation and/or external supervisor. A specific contact is made with the training organisation and BtS in order that there can be reciprocal feedback and meetings where appropriate. Contracts are also exchanged between the volunteers and BtS.

Ultimate clinical responsibility for the work carried out at BtS rests with the Service Lead. Formal procedures and agreements are in place to promote shared participation in the preservation of ethical and good practice, and to resolve any difficulties that may arise.

The pathways for complaint and support are clarified and a clear boundary and access to line-management support is offered to the trainee/associate volunteers by the Service Lead who does not provide supervision to the volunteers.

The Service Lead has managerial responsibility for the volunteer scheme which has been developed over a number of years.

Volunteers are either on the second year of a Diploma in counselling (or equivalent) or post Diploma counsellors wishing to gain higher education counselling experience and/or who are working towards BACP or UKCP Accreditation. All volunteers are required to be members of the BACP.

Good relationships with training organisations mean that colleges suggest BtS as a possible placement. Applicants are sent a letter and information sheet explaining what the placement requirements are and what the BtS offers to its volunteers. A training/induction day is provided for successful applicants as well as weekly supervision and professional indemnity insurance. Several CPD training events are also provided each year.

Interviews are conducted by the Service Lead and an experienced counsellor and take the form of pre-designed questions that are scored 1-5 against each question by both interviewers. There are normally many more applicants than places available for volunteers and the decision to appoint is determined by a combination of the quality of references received, the recorded session received prior to interview as well as past relevant experience and marks achieved at interview.

Group supervision is provided by Off the Record and takes place every fortnight. External clinical supervision of two hours for every 8 hours of counselling is the responsibility of the volunteer. Volunteers are required to provide evidence of attendance. Failure to do so can lead to the placement being terminated.

Information on how to use supervision is delivered at an early CPD workshop and written documents as a part of the induction pack for new volunteers.

The Service Lead is available to speak to clinical supervisors prior to the placement commencing to monitor and answer any queries presented.

All clients destined to be seen by our volunteers are assessed by the Service lead and a clinical decision is made concerning the client appropriateness for trainee counsellors. The Electronic Registration Form and CORE scale is used in this process. Students who are required by their colleges to tape their work have to adhere to the BtS guidelines for taping.

Volunteer attendance at the Induction Training Day is compulsory and provides an overview of the service and the service aims and philosophy. The office procedures are explained as are our processes of electronic registration, assessments, at risk forms and the use of CORE and discussion is invited to explore some typical problems that staff and students at a university present with. Volunteers are also invited to attend Team Meetings and social events.

BtS promotes best practice in the support of both its clients and volunteer staff by providing a safe and caring environment that is grounded in best practice.

At least one, experienced and qualified BtS counsellor isincluded on the interview panel for all paid and voluntary counsellor appointments. The panel for the recruitment of paid permanent counsellors also includes an additional, external, experienced and qualified counsellor as well as Meridian’s Director.

**Equal opportunities**

BtS is committed to anti oppressive practice. As a black organisation we are aware of the inequalities that face BME communities on an everyday basis. From institutionalised practiced to the daily misuse of imperialist language we work hard to ensure both staff and participants are never made to feel excluded by our malpractice. Because of our experience we are committed to ensuring these inequalities are never experienced by other communities who experience oppression and inequality. This includes and is not limited to members of LGBT communities, women, people with a disability and working-class communities

BtS is committed to promoting equal opportunities for both staff and for the users of our service and to alleviate discrimination. An atmosphere promoting “inclusiveness” and “collaboration” and working in “partnership” throughout the service in order to meet the overall needs of the users of our service. A “client centred” approach underpins the provision and development of BtS.

This can never be merely lip service, or a need to be ‘politically correct’ which in itself is often offensive. BtS respects individuality, and values differences. We aim to provide a welcoming working environment for everyone irrespective of age, culture, disability, education, race, religion, sexual orientation, gender, social class etc. All BtS staff attend our own in-house diversity training and there is ongoing interest and support through team member’s intention to be consciously aware of supporting individual values and belief systems.

BtS partnership working across the three sectors and in communities increases access to BtS. Networking with external agencies broadens our ability to make effective referral. Participation in working groups within Front line service services promotes discussion and awareness of the issues faced by our target group.

Monitoring and review of diversity related policies takes place at monthly meetings and team development days to comply with relevant legislation to embrace diversity and non-discriminatory practise amongst our staff, trainees and users of the service. Both our Electronic Registration form and our evaluation forms invite information about ethnicity and nationality and gender**.**

The overall team (including partners from Off the Record) comprises of individuals who practise in differing counselling orientations offering a wide range of Humanistic and Psychodynamic practice to promote diversity within the team and offer best skills sets to clients’ needs. We have a varied group of core team and volunteer counsellors who offer a wide age group, social class, cultural/ racial backgrounds and sexual orientation. The service aims to meet the needs of a diverse and culturally wide University wherever possible and through training either internal or external to the service.

To increase accessibility, we currently provide counselling in a number of locations and campuses i.e. Design Exchange; Bradford Counselling Service; Beeston Business Centre.

Our commitment to best practise is informed our Ethical Code of Practise and our membership with BACP underpins the ethos of how we conduct ourselves.

Service Electronic Registration forms ask for clients to inform us of their gender, ethnicity and nationality. Service user evaluation forms with an emphasis on diversity and access are sent or given to clients after the completion of counselling. These are either handed to clients at the end of the counselling contract of sent electronically via e-mail to increase accessibility. These forms are collated in our data base and statistics are evaluated every three months and feedback reviewed as and when it is received. Feedback is utilised to improve the service and change aspects of the service which may not be working effectively. These forms have been useful to address and ensure that cultural issues are attended to by the Service.

We are aware of gaps in our service and have looked at ways of resolving and meeting where possible those areas which address the provision of a comprehensive service. With recent re-structure we are attempting to enable easier contact and communication. This may take time but is a very important and on-going goal.

We have extended our twice weekly Drop-In to every week day at times where there is a large waiting list and continue to develop groups and workshops aimed at timely intervention for support. We recognise we need to look at ways of publishing our groups more effectively at our satellite sites and thereby increase accessibility

**Flexibility is key**

In 2018 we came to see that it took on average 2.2 years from seeing our poster to building the courage to make the call. As a result we developed a range of flexible working practices to make the service as accessible as possible:

Our service users told us that they couldn’t identify with the words sexual and abuse – because of ‘haya’ and because of the way that they were socialised into masculinity. They identified these terms with the experiences of women (tragically for female survivors and victims) and felt the language was ‘effeminising’ and stripping them of their ‘masculinity’ and feeding the sense of self-blame and responsibility they’d attributed to the experience of sexual abuse. The same was true of the words ‘victim’ and ‘survivor’. so we removed language that was difficult for them to integrate, and used the psychoeducational element of our programme to tackle conscious and unconscious bias that could be harmful to the recovery of women and gay men.

Furthermore we learned of the need for more flexibility in our delivery – some are managing engagement with multiple agencies, and thus any expectation of weekly engagement was unreasonable. For others, after the first disclosure, the period of confronting the truth was extremely difficult and fraught with risk. So, whilst our contract stipulates a level of rigidity, in reality we are more flexible and understanding of the need to grant male survivors a wide berth at this most difficult of moments in their lives.

**The Model**

The first stage of recovery and treatment is not about discussing or ‘processing’ memories of unwanted or abusive experiences, let alone ‘recovering’ them. The first stage of dealing with and overcoming such problems is about establishing safety and stability in one’s body, one’s relationships, and the rest of one’s life.

The second stage is remembrance and mourning. Healing is a prolonged and often painful process.

A) learning one has been lied to

B) determining the nature and extent of these lies

C) discovering truths that work for the survivor to replace the lies he was taught

The third stage of recovery focuses on reconnecting with people, meaningful activities, and other aspects of life. (Even before this stage, when clients struggle with trust and don’t always feel safe, they speak of how positive relationships are very important – with friends and family . Survivors say it give their lives meaning.

• He has mourned the old self destroyed by the trauma; now he must develop a new self

• His relationships have been tested and forever changed by the trauma; now he must develop new relationships

• The old beliefs that gave meaning to his life have been challenged; he must now find anew a sustaining faith.

Herman, J. (1992) ‘Trauma and Recovery’

For a more thorough exploration of the model and how we adapt it for racialised clients see ‘group programme’

**Safe spaces**

All the spaces we provide are safe and secure. We recognise the importance of anonymity, - and given the rise in profile of BTS we recognise this comes at a cost to your privacy. We have taken steps to ensure all face to face meetings are innocuous to secure you from exposure.

For our services online, we have made use of Doxy.me - the preferred tool of clinical staff and recommended by BACP, Online Therapy Institute (OTI) and the Association of Counselling and Therapy Online (ACTO) because it meets the US standards under the Health Insurance Portability and Accountability Act. This met the standards under the British DPA/GDPR 2018 - essentially end-to-end 128-bit encryption, with no data stored in their cloud servers, and no data sold to third parties (unlike Skype).

**Quality assurance**

As we move towards greater Shafafiyyat (transparency), maharat and taraqi, we must develop the service in accordance with a nationally recognised set of Quality Standards. In this endeavour we have commenced the process of becoming independently accredited.

**Involving Male Survivors**

For Breaking the Silence the involvement of male survivors from racialised communities in developing, updating and improving the programme, has been fundamental to our success.

Whilst Meridian was established to further the needs of women from our communities, racialised male survivors really do have a voice in the strategic development and operational delivery of services and interventions by Breaking the Silence. Male survivor voices can be heard in our campaigning, education and lobbying; even where cultural custom and religious tradition inhibit their visibility on our website and printed literature.

From our inception it has been essential that the true voice of the community be central to our design. With so few racialised male survivors back in 2012, with the threats of actual harm to survivors and our staff, the design of the programme had a colonial quality. Well wishing friends from without offered their expertise and helped us design the first programme. But service users soon made clear that, whilst this design contained the seeds of healing, it was watered from the wrong spring, and thus could never bloom. Through the bravery of a few, collaboratively we redesigned, reformulated – and most importantly, refinanced through more ethical sources that would not subject users to the indignity of the security state.

Because of our male survivors, we have introduced a range of services, projects and programmes to better serve their needs. As one male survivor said, ‘sexual abuse is not all of our story’. These survivors have gone onto speak to Ministers, civil servants, researchers and press. They are the reason we exist and continue to grow.

There are a number of ways in which male survivors can be involved:

**Ummid Advisory Group**

Those male survivors that use or have used our services are one of the key stakeholders we count on.

How do we know what we’re doing is right? What about when we get it wrong? How do we keep meeting the needs of our beneficiaries?

Well, we do it through our Ummid Advisory Group (UAG), which is a common way that many health organisations or change makers ensure that those that are affected by it’s output are front of centre of decisions.

If you are a male survivor, from a racialised community, over the age of 18, who has been through our programme, and are interested in becoming part of this exciting feedback loop, then email info@breaking-the-silence.org.uk

**Evaluation and Feedback**

The Director and Service Lead meet three times weekly as a minimum during term time (alternating with group supervision) as well as for ‘clinical meetings’ which allows for best practice discussion. Team meetings (at least 12 per year) are used for review and discussion of all matters relating to the running of the service and for information exchange and intra-group issues which are minuted. This rotation of meetings throughout the thirty weeks of term-time provides a continuous reflective process for reviewing all matters relating to running of the service. In addition, at least two other full days per year are devoted to planning meetings for review of past activities, evaluation of service procedures and future planning.

With the use of CORE question forms completed at all sessions we are able to evaluate together the impact or counselling. This process introduced to our service in 2013 has been widely regarded as helpful to counsellors and clients who are able to clearly see areas of emotional difficulty which have been addressed or still need to be supported. The use of CORE in our work with clients has enabled discussion about continuing support where evidence shows a need as well as a celebration of emotional improvement. In most cases our clients have moved from ‘clinical’ disturbance to ‘non clinical’ at the end of their counselling contract.

Clients’ responses to their counselling experience is formally evaluated by CORE as above and our ‘evaluation questionnaire’, handed to clients at the end of their therapy programme. This questionnaire is also emailed or sent to clients who may have prematurely ended counselling. Responses to these evaluation forms are analysed and both quantitative results and comments are circulated within the team for information and annual formal review.

We have attempted to address the evidence from our evaluation forms that there is a long wait at times from the first assessment session and ongoing counselling sessions and have gone someway to addressing this by at times of a high level of applications to run a daily drop-in service. We write or email clients on the waiting list saying that we are sorry they are still waiting and remind them that they can if they wish come and speak to a counsellor in the meantime at one of our Drop-ins.

All staff are subject to annual appraisals and six-monthly reviews and these meetings will also be informed by clients’ feedback and external supervisor’s reports. Findings are monitored and support given to meet any needs within our budgetary scope and there is always provision for extra supervisory support where required.

Trainee and Associate counsellors on placement are supervised in-house by the Service lead. Twice yearly supervision reviews are jointly completed by their supervisor at an individual supervisee meeting where personal and developmental needs are monitored and supported.

Changes to procedures are discussed and agreed as part of the above process of continuous review. This takes the form of reviewing student evaluation forms, CORE assessment and Staff Personal Development Review and twice yearly reports jointly completed by the Director and the Service Lead.

Volunteer counsellors also complete a questionnaire at the end of each year and feedback from our volunteers and their suggestions are discussed within the core team and where possible followed through to meet the needs of volunteers and our clients to better enhance overall service provision.

As an outcome from all the above review procedures, an Annual Report is produced by means of which the Service reports upwards to the Board.

Anonymity of client feedback is always preserved beyond the boundaries of the Service.

**Health and Safety**

The Service complies with current Health and Safety at Work and similar legislation under similar policies to the rest of the Meridian Centre.

Each counselling room has a fitted alarm button and there is no lone working at any site where counselling is offered.

**Home visits** are sometimes undertaken by the counselling service but only by the project lead or the Director.

Each client assessment includes a CORE Evaluation 34 questions form and where risk is identified BtS has documentation to support and raise awareness to client risk assessment. At Risk Clients are easily identified by **green edged see through folders** and administrators allocate those at risk first.

**An alarm button with exterior flashing light is fitted in each counselling** room and rings in the main counselling building as well as alerting the Central office at Meridian. Personal alarms are available at other locations. Counsellors are required to work only where there is someone else within earshot another counsellor, security guard or receptionist. No lone working is allowed.

The counsellor is to work under BtS risk assessments methods (demonstrated in your initial induction). If lone working off site, the counsellor is to adhere to the risk assessment for that site.

**Perpetrator Policy**

Breaking the Silence does not support perpetrators of abuse as perpetrators; including but not limited to sexual abuse, honour-based abuse, or domestic violence. We recognise that being a survivor is complex, and the systemic damage caused by abuse can, occasionally, lead to harmful behaviours. Therefore if you are a perpetrator, but also a victim, we will support you as a victim.

We will endeavour to get you the right support for the perpetration. We work collaboratively with organisations e.g. Drive, Fresh Start, Changing Pathways, who offer perpetrator programmes, and we can signpost you to the appropriate support.

**Administration**

**All records** are kept securely and confidentially electronically. Paper records in filing cabinets are kept locked when the administrator is not present and computer records by passwords and through use of encrypted drives. The **Electronic Registration form is filed in two parts – part 1 is filed under surname and number and part 2 which contains emotionally personal facts and feelings is filed by number in a different filing cabinet.**

The Service complies with the Data Protection Actand other relevant legislation and all ongoing clients sign a **Statement of Consent**.

**The consent statement signed by every client includes; “I know I am entitled to see the information if I ask to.”**

These arrangements are to be made with the BtS Head of Service at the start of the counselling role.

**Management**

All service staff meet regularly with the Director. These meetings occur weekly. Group supervision is offered bi-weekly (with an external supervisor) and held at Bradford Counselling Services. Agenda led formal meetings take place monthly. One hour of clinical case work supervision is required for every 8 hours of practice.

All temporary and volunteer counsellors are supported by the service lead regularly (weekly throughout the period during which they offer counselling). The supervision of volunteers’ case work is provided by the Service lead. The temporary and volunteer counsellors are given service system and procedural training at an Induction Training day and in their regular meetings with the service lead.

The Service Lead closely and regularly (weekly as a minimum) monitors and responds to the level of service demand. A waiting list has been the norm for a number of years. The Lead checks to ensure that waiting times are kept to a minimum and that the prioritisation of ‘At Risk’ clients enable those at risk to receive the next available appointments without being placed on the waiting list where possible. At Risk clients are identified by a **green coloured strip on their folder** containing the client’s registration documents which immediately shows a need to allocate as soon as possible.

All counselling staff works within a service culture which encourages appropriate open and transparent working practices. Group supervision and the supervision of volunteers’ case work is conducted with a spirit of disclosure of counsellors’ strengths and weaknesses. In depth **post counselling evaluation forms** are sent or given to ex-clients after counselling work has concluded. The returned forms provide the Service Lead with feedback which identifies the counsellors who worked with the person returning the form. The Service Lead and the relevant counsellor thereby become acquainted with specific qualitative and quantitative feedback on the quality of their work. The feedback which the Lead receives from his own ex-clients is discussed with his own supervisor and the Director. Any reasons for concern which arise from the client feedback are discussed in person by the counsellor and the Service lead. Feedback from colleagues, line manager and clients is evaluated and afforded a high level of importance. It informs the service operational and strategic planning and development.

All staff working within BtS engage with colleagues and clients in ways that make the nature of their contact explicit. Clients access individual counselling (which is explained and contracted in advance), group trauma therapy work, talks and presentations. Colleagues engage with one another in a variety of ways which are known in advance, and which have been discussed and described so everyone knows the role and purpose of the engagement.

Formal links exist between BtS and other agencies in all sectors. Subject to client consent (unless there is present a significant and immediate risk of suicide, harm or violence) counselling staff communicate, verbally and in writing, with local medical services including GPs and Community Mental Health Teams.

**Criterion 6: Delivery**

**Accommodation**

All Counselling, including online sessions are to be done in BtS counselling rooms, hired counselling suites, or in public place that has been risk assessed as suitable and signed off. A room is to be booked in advance via the administration staff. Counselling is always offered in places that afford anonymity.

Good secretarial support ensures that counsellor and client are not interrupted, and clients are escorted to and from the counselling room via reception.

Entrance to the building which provides wheelchair access is discreet being situated at the back of the building and a comfortable waiting room is provided for clients to sit in whilst waiting for their counsellor. Reading material is provided in the form of casual magazines. Sensitive documents about mental health issues are also available in the form of an information file. Leaflets advertising other help are also visible. There is a radio providing background music. Water and cups are available at all times.

**Professional Conduct**

All counsellors working in the Service adhere to BACP’s *Ethical Framework for Good Practice in Counselling and Psychotherapy* and **copies of this are given to all Trainee and Associate counsellors**. For the information of clients, **a copy of the *Framework* is displayed in the waiting room**; there is also a link from the Service website to the *Framework* on the BACP’s website.

It is standard practice to carefully consider the content or Electronic Registration and then to conduct an assessment/first interview with all clients as soon as practicable after referral. During this first session the client’s presenting issues and desired outcome will be considered against what the Service is able to offer. Alternative or parallel referrals may be discussed with the client at assessment or later in the counselling:

* liaison with GPs is common (with client consent) over issues such as medication or onward referral to other services (e.g. CMHT)
* referring on to local NHS-funded Student Mental Health Service, is available (via GP)
* difficult client issues will be discussed with a peer, the director or clinical supervisor
* a psychiatrist (Paul Buckley) is retained by the service for consultations on mental health issues
* Meridian provides appropriate services of mentoring, disability etc for clients with special needs; the Service liaises with, and refers to, these services.

All counsellors working in the service are members of professional bodies (BACP, UKCP, BABCP et al). They adhere to normal professional guidelines for maintenance of their CPD. The Meridian Centre funds some of this.

Confidentiality is scrupulously maintained within the service. Diary entries, internal referral notes and emails refer to clients by first name and initial letter of surname and/or reference number. All client material is kept securely locked out of hours and when reception is not staffed. A client record database is maintained, within Data Protection legislative guidelines, for administrative purposes and statistical reporting.

**Document Control**

Imran Manzoor is the owner of this document and is responsible for ensuring that this policy is reviewed in line with the review requirements of the General Data Protection Regulation.