



## **SAFEGUARDING POLICY**

### **STATEMENT**

Tilehouse Counselling is committed to providing a safe environment for staff and clients. This policy and procedure relates to the identification and monitoring of people who present a risk to themselves or others, or who are themselves at risk from others. Given the wide variety of clients seen at Tilehouse, there are likely to be a number, however small, of clients who are vulnerable or for whom there is a risk of experiencing or causing harm. For the purposes of this policy the terms 'at-risk' and 'vulnerable' can be used interchangeably.

Tilehouse Counselling aim to ensure that our clients are, as far as is practically possible, protected from all forms of abuse, and from harm to themselves. We will seek to ensure that when there is good reason to believe that a child or vulnerable adult is suffering, or at risk from abuse or harm from themselves or others; then the correct and proper procedures are followed in the best interests of the person.

### **Process**

1. Identification
2. Communication
3. Assessment
4. Action
5. Monitoring and reassessment

### **POLICY**

#### **1. STAFF AND VOLUNTEER RECRUITMENT**

Staff and volunteers who will be working with vulnerable young and adult clients are recruited with special regard to child protection issues. Known abusers will be excluded from working at Tilehouse Counselling and it will be made clear to applicants that posts at Tilehouse Counselling are exempt from the Rehabilitation of Offenders Act 1974.

- Staff and volunteers undergo disclosure, vetting and barring checks (DBS) prior to working with vulnerable young and adult clients.
- There are clear job description and person specifications for each post.
- Two references are requested, specifically regarding suitability for work with young people and vulnerable adults.
- A signed statement is required of applicants regarding any previous convictions.

- Applicants are interviewed by a minimum of two people.
- Staff and volunteers undergo a three to six month probationary period.
- Staff and volunteers undergo annual reviews with their line manager. In addition, counsellors engage in two-way reviews with their clinical supervisors.

## **2. GOOD PRACTICE**

- Vulnerable clients who are engaged in counselling and/or therapeutic group work are encouraged to develop a positive sense of themselves. Autonomy and independence are engendered by the provision by Tilehouse Counselling of a non-judgmental, supportive, safe environment in which thoughts, feelings and experiences can be explored. Tilehouse Counselling believes that their clients have a right to be safe and contained in their activities.
- Tilehouse Counselling offers an environment in which clients are treated with respect and suffer no discrimination as a result of their age, disability, gender (including reassignment), marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- Clients are encouraged to voice concerns about abusive or unethical behaviour without fear of recrimination. Clients and counsellors are offered ongoing support throughout any safeguarding process that is invoked.
- Client issues regarding Safeguarding are discussed, monitored and reviewed in regular clinical supervision and with the Tilehouse Director.
- This Policy is under annual review.

## **3. TRAINING**

Tilehouse Counselling will seek out Safeguarding training opportunities to inform our work. Safeguarding issues will be reviewed at six-weekly Clinical Services Meetings and during weekly clinical supervision.

## **4. RESPONSIBILITIES**

### **Designated persons**

- The people with key responsibility for coordinating Safeguarding matters are the Operations Manager and the Clinical Lead, with the Clinical Governance Group overseeing. The Tilehouse Counselling Management Committee is ultimately responsible for the implementation and monitoring of the Safeguarding Policy.

### **General responsibility**

- All staff, counsellors and volunteers are responsible for ensuring that child and vulnerable adult protection is a primary concern, and that the policy procedures are adhered to.

## 5. PROCEDURE AND DOCUMENTATION

If any member of staff or volunteer has good cause to suspect that:

- (a) any form of abuse is taking place
- (b) a client is at risk of abuse
- (c) a client has disclosed ongoing abuse
- (d) the client is at risk of serious self-harm or suicide

then the following steps should be taken:

- A discussion needs to take place with the client so that the counsellor is as clear as they can be regarding levels of risk and others involved. The Tilehouse counsellor will need to discuss confidentiality issues and boundaries with the client and remind the client of the boundaries of confidentiality as agreed in the first meeting. They will also discuss with the client, Tilehouse Counselling's professional responsibility regarding the safety and wellbeing of the client. Great care needs to be taken in such discussions so as not to undermine the trust in the relationship and to contain, respect and work with the client's anxieties. Disclosures of abuse/risk of harm to outside parties are made with the full prior knowledge of the client, if at all possible.
- The counsellor needs to record this on the Client at risk of harm/self-harm and suicide record. One copy must be held on the client's file and in the locked cabinet in the main office.
- A discussion about the issue should then be had with the counsellor's Supervisor and with the Designated Person, at the earliest possible opportunity. These discussions are to be noted on the appropriate record together with the actions taken as a result. Counsellors may also use the NSPCC (0808 800 5000) for advice if required.  
**If the risk is assessed to be red, the counsellor may need to contact emergency / crisis services** prior to the above discussion, dependent on the situation and availability of the Supervisor and Designated Person [see critical incident flow chart at **Appendix 1**]
- For clients who have been referred to Tilehouse Counselling, once the above steps have been followed, the person with safeguarding responsibility at the referring agency will be informed - when there is such a person. The GP will be informed, and the CMHT or CAMHS if involved with the client. This will be done by the Counsellor, in writing and by telephone if appropriate, and in collaboration with their Supervisor and a Designated Person, next steps are agreed. This will be done with the knowledge of the client at all times possible.
- If the client is self-referred, then, following the consultative process set out above and if it is decided to be in the best interest of the client, the appropriate contact will be made with Family Services or Social Services. This will be done with the knowledge of the client if at all possible.
- The case will be presented at the monthly meeting of the Clinical Governance Group, and recorded on the client record.

- Accurate, clear, signed and dated progress notes must be kept at every stage. Please refer to the Client at risk of harm/self-harm and suicide record form stored on each counsellor's laptop or available on request from the office.

## **6. Allegations against staff and volunteers**

Please discuss any concerns with a Designated Person unless the allegation is against them, in which case please discuss with the Lead Trustee for Safeguarding.

Allegations or concerns of abuse by Tilehouse Counselling staff or volunteers will be thoroughly investigated and disciplinary action may result. Tilehouse Counselling is aware that some allegations of abuse are mistaken or false - we are committed to thorough and fair investigation, involving statutory agencies if necessary.

Allegations or concerns involving children and those who work with them which are considered to be of a serious nature (see below guidance links), will be reported to the LADO (Local Area Designated Officer) by a Designated Person or Lead Trustee for Safeguarding.

The LADO can be contacted on:

Hertfordshire: 01992 555420 Threshold guidance and online referral form [here](#)

Central Bedfordshire: 0300 300 8142

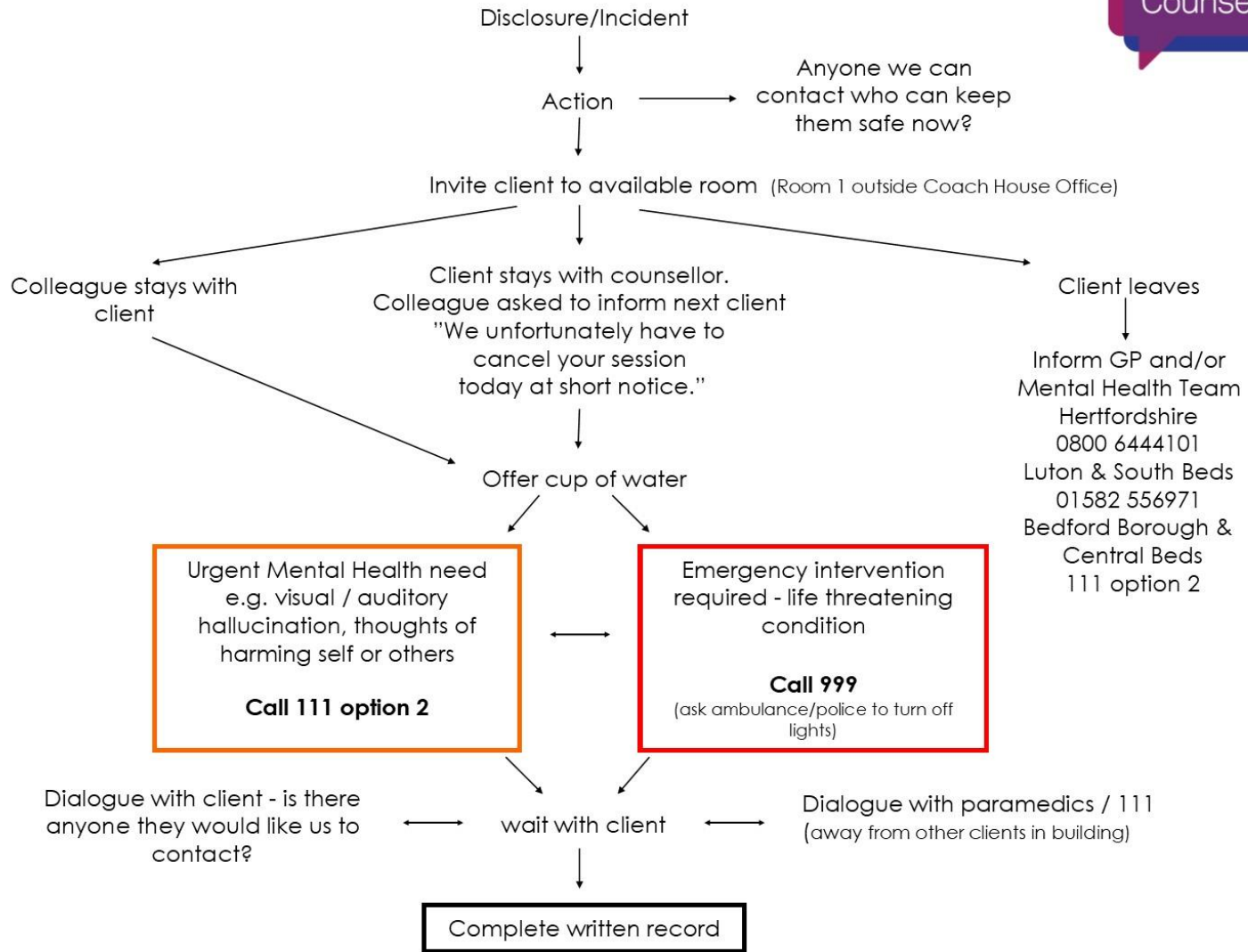
Luton Borough: 01582 548069 guidance and online referral form [here](#)

## **7. CODE OF BEHAVIOUR, ORGANISATIONAL CULTURE AND AWARENESS**

- Tilehouse Counselling staff volunteers are aware of boundary, confidentiality and professional relationship issues as set out in the BACP's Ethical Framework to which we work.
- A copy of the BACP Ethical Framework is available on the [BACP website](#), and of all Tilehouse Counselling working policies are available in the Staff Handbook.

# Appendix 1

## CRITICAL INCIDENT PROCEDURE



Reviewed  
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## **Appendix 2 - Glossary**

### Critical Incident

In this context a critical incident is defined as an in the moment or imminent situation which requires emergency mental and/or physical health intervention. Examples might include but are not limited to: a significant act of self-harm immediately before arrival or on site, a clear and present plan of suicide, symptoms of a chronic / severe mental or physical health disorder such as hallucinations or loss of consciousness.

### IDVA

The main purpose of independent domestic violence advisors (IDVA) is to address the safety of victims at high risk of harm from intimate partners, ex-partners or family members to secure their safety and the safety of their children. Serving as a victim's primary point of contact, IDVAs normally work with their clients from the point of crisis to assess the level of risk, discuss the range of suitable options and develop safety plans.

### LADO

Every local authority has a statutory responsibility to have a Local Authority Designated Officer (LADO) who is responsible for coordinating the response to concerns that an adult who works with children may have caused them or could cause them harm. The LADO duty does not apply to adults at risk though some areas do have adult LADO's who have a similar responsibility where there are concerns that an adult who works with adults at risks may have caused harm.

### MARAC

Multi-Agency Risk Assessment Conference (MARAC) is a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs), probation and other specialists from the statutory and voluntary sectors. The representatives discuss options for increasing the safety of the victim and turn these into a coordinated action plan. The primary focus of the MARAC is to safeguard the adult victim. The MARAC will also make links with others to safeguard children and manage the behaviour of the perpetrator. The victim does not attend the meeting but is represented by an IDVA who speaks on their behalf.

### MASH

A Multi Agency Safeguarding Hub (MASH) brings key professionals together to facilitate early, better quality information sharing, analysis and decision-making, to safeguard vulnerable children and young people more effectively. How the MASH works may vary from area to area and in some areas it may also include the safeguarding of adults at risk as well as children.

### SPA

Many local authorities have a Single Point of Access for safeguarding issues. Some operate 24hrs a day and some only out of hours.

### **Appendix 3 – Legislation & guidance**

The major pieces of legislation and guidance relevant to this policy and its procedures are:

- The Care Act 2014,
- The Children Act 1989 and 2004,
- Safeguarding Vulnerable Groups Act 2006,
- Protected Disclosures Act 2014,
- Data Protection Act 2018,
- European Convention of Human Rights,
- Working Together to Safeguard Children 2018,
- Mental Capacity Act 2005,
- Hertfordshire, Central Bedfordshire and Luton Adult and Child Safeguarding boards guidance for professionals
- BACP Ethical Framework 2018