



<b>Name of Policy</b>	<b>Therapy Service Policy</b>
<b>School Lead</b>	Therapy Service Manager
<b>Approving body</b>	Head Teacher
<b>Date of Approval</b>	May 2025
<b>Date of next review</b>	May 2026
<b>Links to other policies</b>	Child Protection and Safeguarding Mental health and wellbeing
<b>Display/availability</b>	Website
<b>Headteacher signature:</b>	May 2025 



## **THERAPY SERVICE POLICY**

---

### **The Pilgrim School Therapy Service**

This policy aims to set out the framework of operation for The Pilgrim School Counselling Service. In particular the policy establishes the principles and procedures for referrals to The Pilgrim School Counselling Service, obtaining client consent, safeguarding and information sharing, whilst protecting confidentiality which is fundamental to the client-therapist relationship.

### **About The Pilgrim School Therapy Service**

The Pilgrim School Therapy Service is a bespoke service which has been developed in response to the needs of the pupils, their families, and staff within The Pilgrim School community. The Pilgrim School Therapy Service aims to enhance the superb and well-established pastoral systems within the school and offers emotional support to those who are part of The Pilgrim School community, within a safe, familiar and accessible environment. This personal support mechanism is offered to individuals who may benefit from the time and space to talk in confidence with a professional about thoughts, feelings and behaviours they may be experiencing which may be impacting their ability to reach their full potential.

### **Therapists**

The Pilgrim School Therapy Service is managed by a qualified counsellor who holds a Post-Graduate Diploma in Counselling and is a registered member with the British Association for Counselling and Psychotherapy (BACP). As such, they are bound by the BACP's Ethical Framework for Good Practice. The Framework can be viewed on the school website or online at:

<https://www.bacp.co.uk/media/3103/bacp-ethical-framework-for-the-counselling-professions-2018.pdf>

Predominantly, Therapy within the service is provided by a qualified professional who understands the unique nature of The Pilgrim School and the pupils on roll. In order to expand our therapeutic offer, student therapists may also be utilised under the supervision of The Pilgrim School Therapy Service Manager and their University course leaders.

Partnership working with identified universities has been carefully considered and developed over a period of time to ensure the best placement experience possible for student therapists whilst maintaining the high standard of therapy offered to service users within The Pilgrim School. Each university partnered with The Pilgrim School offers the accredited training component for student members, ensuring eligibility for membership of the relevant professional body (typically the BACP or BAAT) and undertakes its own process of assessing suitability of a placement provider. Further to this, student therapists undertake a rigorous application process for their place on associated courses and are further assessed for their suitability to practice prior to embarking on a placement.

Course leaders work with their students to identify suitable placements and establish a link between student and placement provider. From this point, the placement provider (i.e. The Pilgrim School) implements its own vetting procedures, including enhanced DBS, before agreeing to accept a student on placement. Once accepted on placement, the student is required to undergo a period of induction



before being allocated clients. During this period of induction, it is necessary for the student to familiarise themselves with policies and procedures, undergo specific and identified training and meet with specific members of the school faculty. Clients are not allocated to students until the Therapy Service Manager is satisfied that each of these tasks has been completed and the student is ready to practice within the school setting.

All therapists within The Pilgrim School Therapy Service act in accordance with strict code of ethics, applicable to their individual professional body, which requires confidentiality, accountability, supervision and continued professional development.

### **Therapeutic Environment**

Typically, therapy is offered in a safe and confidential environment within a Pilgrim School base. Due to the nature of The Pilgrim School's provision and cohort, for some clients, it may be necessary, for therapy to take place virtually via a video-calling platform or via telephone. Please see the addendum to this policy where further consideration is given to the provision of therapy virtually.

### **Policy Statement**

The Pilgrim School Therapy Service is committed to providing and developing a service which is responsive to the needs of the whole school community and conforms to current best practice and professional standards in England for school-based therapy. Best practice is viewed as a shared responsibility requiring the commitment of the whole school community.

The Pilgrim School Therapy Service will support its clients as far as possible to make their own choices and decisions in relation to therapy. Where the client concerned is not deemed capable of making informed decisions, guardians will be involved provided that this action is consistent with the best interests of the client.

The Pilgrim School Therapy Service upholds that clients have the right to confidentiality in therapy and that this is an essential component of the therapeutic relationship, however, it is accepted that confidentiality is not absolute and safeguarding the whole school community must always be at the forefront of its work.

### **Scope**

This policy applies to all members of The Pilgrim School community – pupils, parents, staff, stakeholders and other professionals external to the school. The policy continues to apply after a client's involvement with therapy has ended and they are no longer part of the school community.

### **Definitions and Terms**

#### **Therapy**

For the purpose of this document (and throughout The Pilgrim School Therapy Service documentation) the definition of therapy is aligned with the BACP definition of formal counselling and psychotherapy as follows and extends to all forms of therapy that occur under the provision of The Pilgrim School Therapy Service:



*Counselling and psychotherapy are umbrella terms that cover a range of talking therapies. Counsellors and psychotherapists are trained professionals who will work with you over a period of time to help you develop a better understanding of yourself and of others. Therapists are impartial. They will listen to you without judgement and work with your emotions without becoming emotional themselves. They won't tell you what to do but will help you find your own solutions – whether for making effective changes or for learning how to cope. There are several different types of therapy and therapist. It's important to find a therapist and a way of working you're comfortable with so you can feel at ease discussing personal and emotional issues.*

For more information, please see the following document:

<https://www.bacp.co.uk/media/15699/bacp-introduction-counselling-and-psychotherapy-client-information-sheet-july-22.pdf>

## **Therapy at The Pilgrim School**

The Pilgrim School views therapy as a way of supporting its school community, encouraging individuals to express their thoughts and feelings. Predominantly, due to resources available in the school setting, this is facilitated through the process of talking and listening in the form of counselling. However, in many instances, the nature of each individual's difficulties call for the school counsellor to integrate other therapeutic activities and interventions into their practice, in order to aid communication and self-expression. Further to this, an alternative, creative therapy – such as art-, drama-, music- or play-therapy - may be deemed more appropriate and offered to clients through the availability of student therapists completing a university placement with The Pilgrim School. Therapy can help a person to understand themselves and their situation better. It can broaden their knowledge and understanding and give them new ways of coping with issues that cause them upset.

Research informs us that it is the quality of the client's relationship with their therapist, rather than any specific technique or approach, that is the greatest predictor of successful therapeutic outcomes. Therefore, therapy will incorporate a range of activities which facilitate and encourage the development of a strong therapeutic alliance. Therapy in The Pilgrim School is part of the pastoral care system and the service is seen as a supportive part of the school community. Successful therapy is based on trust, self-motivation and commitment. It must be a voluntary activity and is therefore not part of the behaviour management policy of the school.

## **Client**

"Client" refers to any individual referred to or utilising The Pilgrim School Therapy Service.

## **Guardian**

The term "guardian" is used as a generic term in acknowledgement of the many variations of family that exist within our community. Throughout The Pilgrim School Therapy Service, "guardian" shall be used to refer to any adult (i.e. parent, grandparent, or other guardian over the age of 18) who has legal responsibility for the welfare and well-being of an individual under the age of 16 years old.

## **Informed Consent**



“Informed Consent”, as it applies in school therapy, is the voluntary agreement of an individual to engage in therapy based on the knowledge and understanding of the therapeutic process, including confidentiality and its limitations. Where an individual is not deemed to have the capacity to make such an agreement, or indeed they are not considered Gillick Competent, consent shall fall to the individual’s guardian.

### **Confidentiality**

Confidentiality may be defined as “when a person(s) receives information, that information is kept private and not shared or disclosed without the consent of the person(s) they received it from.” This policy covers not only information given deliberately by the person concerned, or by other people about the person, but also information acquired accidentally or through observation.” Limitations to confidentiality are discussed more fully later in this policy and detailed in the client contract issued at the start of therapy.

### **Context**

#### **Voluntary Participation**

It is a basic principle that therapy is a voluntary activity for the client. In most circumstances, this is clearly the case: the client has sought the services of a therapist as a matter of choice, rather than feeling obliged to receive therapy or having been sent for therapy. However, therapists working in schools can sometimes experience clients being sent to them either in an attempt to “fix” certain behaviours or in recognition of some kind of distress that the individual may be perceived to be experiencing. There are several potential consequences to these actions.

Firstly, professionals within a school network hold a certain power dynamic which can compromise a client’s autonomy and right to choose to participate in therapy.

Secondly, the client may not perceive their way of being as problematic or distressing, therefore reducing the chance of successful intervention. A fundamental part of therapy is encouragement and harnessing of an individual’s desire to change. Therapy is rarely beneficial for individuals who do not want help, have little to no motivation to change and have a dislike for the process.

Thirdly, the expectations of the referrer for the outcome of therapy may not align with the individual’s own therapeutic goals. It is the client’s own process which gives therapy direction. Any attempt of another individual - be that the therapist, the referrer or other – to impose an agenda other than that of the client undermines the therapeutic process, compromises the client’s autonomy and jeopardises the integrity of the therapeutic relationship.

This policy aims to ensure that participation in therapy is undertaken on a voluntary and informed basis, is supported across The Pilgrim School community as such and works in collaboration with the school network to be the mechanism of support intended.

#### **Guardian Involvement**

Under the Gillick Competency Principle, young people with a mature outlook have the right to access and participate in confidential therapy without the knowledge or consent of their guardian, provided that they are deemed able to understand what is being proposed, involved and potential



consequences. This is the case for most pupils enrolled at The Pilgrim School, however, occasionally there are those who are deemed as not being Gillick Competent.

Additionally, in most cases pupils are willing to agree for a guardian to be asked for consent, and most guardians are happy to give it, but there may be circumstances where either the guardian withholds consent or a pupil is unwilling to involve them. In these circumstances a decision will need to be made as to whether therapy should go ahead by the Therapy Service Manager.

Guardians can withhold consent intentionally (i.e. refusal) or unintentionally (e.g. non-return of consent forms), which can disadvantage individual pupils and potentially delay the start of therapy.

This policy intends to set out the approach of The Pilgrim School Therapy Service to consent to therapy and the procedures to be followed when pupils lack the capacity to give, or guardians withhold, consent.

## **Eligibility**

It is the aim of The Pilgrim School Therapy Service to make therapy available to the whole school community – the pupils, guardians and staff who are part The Pilgrim School. This offer is an equal opportunity, offered to each individual regardless of characteristics protected by the Equal Act 2010: age, disability, religion or belief, race, gender reassignment, sex, sexual orientation, pregnancy and maternity and marriage and civil partnership. In addition to this, provision will be made in consultation with The Pilgrim School SENDCo to ensure that individuals are able to access therapy where there may be additional needs.

## **Pupils**

Pupils who are in receipt of pastoral and/or academic provision from The Pilgrim School either in base or from home have a right to access The Pilgrim School Therapy Service. Given the nature of pupils who enrol with The Pilgrim School, special consideration will be given to the appropriateness of a referral to the service and method of delivery for therapy, specifically taking into account individual circumstances and involvement with other mental health services and professionals (e.g. CAMHS, Healthy Minds, IAPT). Where other mental health professionals are involved, the Therapy Service Manager will discuss this involvement with the individual, referrer and/or professional in order to determine whether it is appropriate for therapy to proceed. A decision will be shared with the pupil once reached.

## **Guardians**

The Pilgrim School recognises the intensity of circumstances that precede a pupil being referred to The Pilgrim School and the benefit having access to therapy can bring. Guardians of pupils on roll with The Pilgrim School have a right to access therapy through The Pilgrim School Therapy Service.

This offer does not undermine the duty of care that The Pilgrim School have towards their pupils and, in order to maintain appropriate boundaries, this provision will only be offered to guardians where a pupil has declined or is unable to engage in therapy themselves. Should a pupil wish to engage in therapy in the future, when a guardian is accessing or has accessed the service, they will be appropriately signposted to an alternative therapist within The Pilgrim School Therapy Service or within the local area.



## **Staff**

All staff working at The Pilgrim School are encouraged to make use of the coaching programme available with colleagues and other wellbeing mechanisms within the school (e.g. line management support, Schools Advisory Service, LCC HR). Where this is not appropriate or more in-depth work is required, individuals may feel that therapy would be of benefit. Staff are able to self-refer to The Pilgrim School Therapy Service by submission of a signed and completed Referral Form directly to the Therapy Service Manager.

Therapy is provided as a measure of support to the employees of The Pilgrim School and will not be enforced or made a requirement for anyone. Staff should be reassured of the confidential boundaries in place throughout therapy and be confident that the service provided is for the emotional support of those who access it. Therapy for staff is not limited to work-related issues and can be for any matter individuals wish to seek support for.

In addition to individual therapy, therapists are available to offer debriefing post-incident during the school day, or at a mutually convenient, pre-arranged time. Working in an environment such as The Pilgrim School can be difficult, stressful and emotionally draining. Therapists are able to offer support in coping with this aspect of the work on an individual or group basis, as required.

Further to the above, staff teams are offered the opportunity to engage in supervision/reflective practice groups as a means of support. Supervision is a confidential space in which staff can speak about and process their work and how it impacts them. They can share expertise, seek different ideas and perspectives from colleagues, celebrate success and validate or challenge experiences.

Supervision groups are determined in consultation with SLT. Whilst participation in supervision groups specific to particular roles is encouraged, it is not mandatory.

Staff who feel supervision would be beneficial to their role are asked to approach either the Therapy Service Manager or SLT in the first instance.

## **Confidentiality**

Confidentiality is an integral part of the therapeutic process. Confidentiality is essential to:

- Develop a trusting, therapeutic relationship
- To enable the client to open up and share feelings without fear of blame, reprisal or judgment
- To allow the client to freely express themselves about the issues that are affecting them
- To encourage others to come forward for therapy

However, “confidentiality” is understood differently by different groups of people, services or individuals which has the potential to lead to misunderstandings. These misunderstandings can damage the therapeutic relationship, diminish the helpfulness of therapy, invalidate informed consent, compromise the privacy of clients or place clients (or others) in harm’s way.

This policy aims to communicate a shared understanding of what confidentiality means within the context of The Pilgrim School Therapy Service and the wider school community, including clarity over



circumstances in which confidentiality may be breached and any actions required in such circumstances.

### **Safeguarding and Child Protection**

The Pilgrim School prides itself on the measures taken to safeguard individuals and the school community. This policy seeks to address the tension between a client's right to confidentiality within therapy and the need to share information for the purpose of safeguarding. The constraints on confidentiality which are seen as good practice in therapy are not always shared by other professionals, and have the potential to be viewed as bad practice inciting a sense of distance and secrecy.

This document outlines the procedures to be followed by therapists when safeguarding concerns are brought to their attention, in order to protect and promote the safety of the whole school community and help to foster confidence in the integrity of The Pilgrim School Therapy Service.

### **Ethical Dilemmas**

The challenges of working to the principles of the BACP Ethical Framework within a school setting can give rise to many ethical dilemmas for a school-based therapist. On occasion, different ethical principles may compete, for example, a conflict around whether to break confidentiality may arise from the conflict between the principles of autonomy and ensuring the safety and welfare of the client.

This policy offers a structure for understanding and resolving any ethical dilemmas that may arise within therapy, provides a means for explaining the reasons behind any decisions or actions taken by therapists and explains the importance of supervision.

### **Legislation and Guidance**

This policy, and the guidelines within it, are shaped, informed by and comply with key pieces of legislation and guidance which includes, but is not limited to:

- The Pilgrim School Child Protection & Safeguarding Policy
- Keeping Children Safe in Education
- Working Together to Safeguard Children
- Children Act 1989
- Gillick Competence/Fraser Guidelines
- Data Protection Act 2018 and General Data Protection Regulation (GDPR)
- BACP Ethical Framework for Good Practice
- BACP Good Practice in Action Resources
- BACP and Welsh Assembly Government School and Community Based Counselling Operating Toolkit (2011. Revised 2020)

Copies of each of these documents are available on request from the Executive Assistant Headteacher, The Pilgrim School Assistant Pastoral Manager or the Therapy Service Manager.

### **Key Principles**





The Pilgrim School Therapy Service adheres to the key principles laid out in the BACP Ethical Framework for Good Practice. Below is an overview of the key principles. A more detailed summary can be found in Appendix 1.

- **Being trustworthy:** honouring the trust placed in the practitioner
- **Autonomy:** respect for the client's right to be self-governing
- **Beneficence:** a commitment to promoting the client's wellbeing
- **Non-maleficence:** a commitment to avoiding harm to the client
- **Justice:** the fair and impartial treatment of all clients and the provision of adequate services
- **Self-respect:** fostering the practitioner's self-knowledge, integrity and care for self

## **Procedures**

### **Communication of this policy**

Internal school staff will be made aware of this policy as part of their induction to the school and a simplified staff leaflet made available as a point of reference. In addition to this, The Pilgrim School Therapy Service will be discussed during staff training and staff meetings throughout the academic year. The full version of The Pilgrim School Therapy Service Policy will be available via the school website and upon request from the main office and the Therapy Service Manager.

The Therapy Service Manager and their team will produce and keep updated, separate leaflets pertaining to different approaches to therapy which will be used as quick reference guides, outlining key components of the policy as they apply to each client group.

Copies of these leaflets will be available around The Pilgrim School bases and as part of an information pack for clients requesting further information about therapy within the school. Information will also be available on the school website. It is the therapist's responsibility to communicate and ensure understanding regarding the availability of the policy with clients before contracting takes place.

Where the involvement of a guardian is considered appropriate, the therapist will also send copies of the applicable leaflets to them along with additional relevant information and requests for consent.

## **Referrals**

### **Referral Process**

The Pilgrim School Therapy Service is accessible to all members of The Pilgrim School community (pupils, guardians and staff). The referral process is outlined in Appendix 2, however, it should be explicitly stated that referrals for therapy can be received from individuals, guardians or professionals providing that they always have the agreement of the proposed client.

In instances that are not "self-referral", it is crucial that the individual concerned is included in the referral process and, ultimately, the decision whether to proceed with therapy rests solely with the individual. As previously stated, the therapeutic process is reliant on the voluntary participation of clients and whilst they can, and should, be supported in accessing this support their participation in the referral process is essential.



All referrals should come via submission of a completed, and signed, Therapeutic Support Referral Form a copy of which can be found in Appendix 2, on the school website and on request from the Therapy Service Manager and/or therapists.

In all cases, therapy will only commence after the receipt of a signed and completed referral form and subsequent assessment process. An initial assessment appointment will then be required to ensure suitability and that the necessary contracting has taken place. Not all referrals received will necessarily be accepted for therapy. In this instance, and wherever necessary, when therapy is not an appropriate mechanism of support, alternative sources of support will be presented.

### **Self-Referral**

Clients may submit a signed and completed referral form directly to the Therapy Service Manager or request a “drop-in” appointment to discuss any aspects of the referral or therapeutic process that they may be unsure of. Clients may be supported to complete the referral form or attend drop-in sessions as required. However, neither professionals, nor guardians, nor colleagues, nor peers will be permitted to attend any formal appointments (i.e. from the point of the initial assessment appointment) with the client unless explicitly requested by the client and the support is not sustained for any longer than is deemed necessary as an essential part of the therapeutic process or for the effective transition into the therapeutic space.

### **Referral by Guardians**

Guardians may request therapy for a young person through the Therapy Service Manager, Pastoral Support & Welfare Specialist (PSWS) or other Pilgrim School staff member, or by submitting a completed referral form. Where necessary, a “drop-in” appointment for guardians can be arranged in order to facilitate the referral process or discuss the appropriateness of a referral prior to submission.

In all cases of the referral of a young person by a guardian, it is essential that the referral is discussed with and signed by the young person prior to submission.

Where a guardian is seeking therapeutic support for themselves, a referral form should be completed and submitted directly to the Therapy Service Manager. Discussions may take place with a family’s pastoral or academic link and consideration to alternative services outside of the school setting should be considered prior to referral. Should a guardian request a drop-in appointment or opportunity to discuss a referral with the Therapy Service Manager, this will be carried out virtually via telephone or video-call. In-person appointments are not usually offered to guardians due to safeguarding and issues relating to boundaries within the school setting.

### **Referral by Professionals – Internal or External**

Referrals to The Pilgrim School Therapy Service can also be made by professionals working with individual members of The Pilgrim School Community on their behalf. These professionals may be employees of The Pilgrim School or from external agencies supporting pupils, families or staff at The Pilgrim School.

All referrals from these professionals must be made with the agreement of the proposed client. Therapy should not be forced on clients, although attempts to encourage potential clients to accept support should be made.



Professionals will need to complete a referral form and seek a signature from the proposed client before submission to the Therapy Service Manager. The Pilgrim School Therapeutic Support Referral Form can be accessed directly from the school website, on request from the Therapy Service Manager, therapists or the main school office.

### **Assessment and Contracting**

Once the referral has been received, the Therapy Service Manager will assess the information provided and request further information if required. A suitable therapist will be allocated based on the following:

- Information received in referral
- Level of risk detailed in referral
- Therapy service capacity
- Therapist capacity
- Experience, qualifications and expertise of therapist
- Client and therapist availability

Once allocated, the therapist will invite the client to attend an initial assessment appointment in-person or via telephone. This appointment is an opportunity for the client and therapist to explore what the difficulties may be and how therapy may help, to discuss expectations for therapy and assess risk. The therapist will also ensure understanding of the terms of therapy in preparation for contracting should therapy proceed.

Prior to contracting, risk is assessed. Alongside the verbal and written information provided, assessment is based on how safe a client considers themselves - and others in their world - to be, their ability to engage in the assessment process, environmental factors, physical health factors, risk taking behaviours and their presentation during the assessment appointment.

During the entirety of this process, therapists will also assess their own levels of capacity and ability to work with the client's presentation.

Any concerns that arise during the assessment process should be immediately brought to the attention of the Therapy Service Manager by the therapist.

Therapy will only ever begin, on a voluntary basis, with the client's informed consent. Therapists are expected to facilitate informed decision making by clients by using information leaflets and a therapeutic contract as an aide memoire to explain the nature and boundaries of therapy, including boundaries of confidentiality. During this initial assessment appointment, the therapist is available to answer any questions or address any uncertainties that the client may have.

Where a client indicates within their initial assessment appointment that they would like on-going therapy, the therapist will introduce the Therapeutic Contract, specifically detailing the limitations of confidentiality. During this appointment, the client will be supplied with a copy of the contract to read prior to their first appointment. The client will be asked to sign this contract with their therapist during their next appointment.

### **Guardian Involvement**



In the case of a client being a young person (under the age of 16 years old, i.e. a pupil), the therapist will make every effort to encourage the individual to inform their legal guardian that they are receiving therapy, unless to do so would be detrimental to their safety or well-being.

### **13 – 16 Year Olds**

In the usual course of events, for clients aged between 13 – 16 years old, the therapist will carry out a dynamic assessment of competency based on information gathered from the referral paperwork and initial assessment appointment. Therapists will seek written consent from one of the individual's guardians via the individual after they have made a verbal agreement to engage in therapy, which usually (but not always) takes place during the initial assessment appointment.

In order to make guardian consent as informed as possible, the therapist will send the guardian an introductory pack which includes: an introductory letter, a guardians' leaflet, a copy of the Contract due to be signed by the client and the Guardian Consent and Confidentiality Agreement.

The therapist will send the Guardian Introductory Pack home with the individual at the end of the initial assessment appointment and remind them of the need for signed forms to be returned. Therapy will proceed regardless of the return of these documents. If the Guardian Consent and Confidentiality Agreement is not returned within 2 weeks of the next appointment and providing the client has not refused guardian involvement, the therapist will send a further pack to the guardian via post, requesting that it is returned as soon as possible. Within this pack, the therapist will advise that if the Guardian Consent and Confidentiality Agreement is not received, the therapist will assume the guardian does not have objections to the individual receiving therapy and therapy will continue.

### **Withheld Consent**

Should an individual request that their guardian is not informed of their involvement in therapy, the therapist will explore this with the client and work with them to help them understand the potential benefits of this involvement, working towards obtaining their agreement, unless doing so would place the individual at risk of harm.

In the event that an individual requiring therapy remains insistent that their guardian is not informed of therapeutic involvement, or where a guardian explicitly withholds consent, the therapist, Therapy Service Manager and Executive Assistant Headteacher/Assistant Pastoral Manager will complete an assessment, using Fraser Guidelines (Appendix 3), to decide if the individual is Gillick Competent and therefore able to continue to access therapy without their guardian's knowledge or consent.

If the individual is deemed Gillick Competent, the individual, school Therapy Service Manager and therapist do not have to inform the individual's guardian that therapy is taking, or has taken, place. If an individual is deemed not to be Gillick Competent, written consent from the individual's guardian will be necessary before therapy can commence. The client will be advised that therapy cannot take place without this consent.

### **Under 13 Year Olds**

Where a therapist is working with a client under the age of 13 years old, it is expected that written consent is obtained *before* therapy begins. Good practice dictates that the Therapy Service Manager and/or therapist should make themselves available for an initial meeting with the client's guardian(s) to allay any anxieties and answer any questions they may have about therapy and the therapeutic process.



The therapist will not generally encourage on-going contact with a client's guardian(s) or attend meetings about the client. Even in circumstances where clients wholeheartedly agree with this type of contact, it has a tendency to diminish the client's trust in the therapist and alter their perception of therapy as "their space". It can also lead the therapist to detract from the client's agenda for therapy.

Upon timely written request, it may be possible for the therapist to submit a brief report for the purpose of a multi-agency meeting regarding a client. This will only be done with the agreement of the client and if the client has opportunity to approve the report prior to its submission. Reports of this nature will not contain any details regarding material discussed in therapy sessions and will purely remark on engagement, attendance and the client's feedback regarding therapy received.

### **Therapy Sessions & Contact**

All clients have the right to withdraw from therapy at any time. This will be made explicit to clients through verbal and written contracting.

While all clients should be encouraged and supported to access therapy sessions, it is never acceptable to pressurise a client/potential client to do so.

Therapy is not a reward nor punishment. It should not be seen or ever used as a punitive measure, either in the sense of giving or withholding support from an individual. This is especially true when considering an individual's level of compliance, particularly within a school community. More often than not, "problematic" behaviour is the result of experiencing stress or distress and this is the time when therapy could be of help to an individual.

Wherever possible (and appropriate) when an individual has not attended (or indeed cancelled) three consecutive therapy sessions, the therapist will approach the individual, outside of the contracted appointment time, to ascertain their wishes and feelings about continuation of therapy. In certain circumstances it may be more appropriate for the individual to be contacted by another member of The Pilgrim School staff to gauge the individual's intentions regarding their commitment to therapy. This is not the preferred course of action and will only be pursued following careful consideration. Following this communication, a decision will be made about the continuation of therapy and communicated to the client.

The length, frequency and method of individual therapy sessions can vary, depending on the style and orientation of the therapist, the needs of the individual client and structure of the school day. Sessions tend to take place on a weekly basis and last between 30 minutes and 1 hour. This will be agreed with a client at the commencement of therapy but may be amended during the course of therapy as a result of the on-going review process.

Whilst being mindful of the principles of the person-centred approach which regards review as an on-going process encouraging reflection of the therapeutic process and relationship between client and therapist, therapists will endeavour to carry out regular reviews of the therapeutic relationship and process during every sixth session to ensure that therapy is still necessary and relevant.

The service offered is flexible and open-ended. There is no limit to the number of sessions that clients can have, provided that both the client and therapist feel that therapy continues to be of benefit to



the individual. The number of sessions a client is offered may vary from a one-off “drop in” session to resolve an immediate concern, to weekly term-time only sessions throughout the academic year which has potential to span multiple years, up until the client leaves The Pilgrim School. For pupils, this dictated ending is determined either by their reintegration to mainstream/alternative education or by reaching the end of their statutory school education (i.e. the end of June at the end of Y11).

Further to this, student therapists on placement at The Pilgrim School will be bound, to a certain extent, by their course requirements for placement hours. When a client engages in therapy with a student therapist, the timescale and number of potential sessions offered will form part of the contracting process. Should a therapeutic ending not be deemed ethically appropriate at the end of the student’s placement, discussions will take place between the Therapy Service Manager and student therapist, and, if applicable, course leaders and the external clinical supervisor on how best to manage this and ensure a safe handover to enable therapy to continue at a more appropriate time.

As part of the initial assessment process, the Therapy Service Manager will do their utmost not to arrange therapeutic work with members of the school community which is unlikely to be completed within the time that remains of their involvement with The Pilgrim School, nor assign student therapists to work which may require a timeframe beyond the scope of the student’s commitment to the placement. Where this applies, the Therapy Service Manager will endeavour to support the client transition to alternative therapeutic provision within The Pilgrim School Therapy Service, the local community or education provision.

Due to the nature of The Pilgrim School, limited flexibility may be offered in terms of session days/times. Wherever possible, the therapist will strive to arrange sessions with clients around their preferences. However, the therapist should also encourage the client to pay due diligence to the following considerations:

- Timetabling (pupils and staff)
- Location (pupils and staff)
- Academic needs (pupil)
- Staff cover and support needs across the school
- Mode of therapy and suitability of such (i.e. in-person, telephone, video-call)

For some clients and scheduling purposes, it is important that the therapist maintains the same schedule for the duration of their therapy. However, if requested by the client, therapists are encouraged to consider rotating times to avoid repeated absence of the same lesson/subject or impact within the school.

### **Contact and Out of Hours Support**

The Pilgrim School Therapy Service currently runs in line with the academic calendar and, as such, is operational within the school day and term dates set out by The Pilgrim School. Typically, contact with the service is only possible during the hours of 8.30am and 4.30pm. In addition to this, availability of the Therapy Service Manager and individual therapists will depend on their individual schedule. Clients shall be made aware of these limitations at the onset of therapy.

In order to support clients outside of these hours, therapists and staff at The Pilgrim School will make available signposting to various services which are available both locally and nationally. In any event,



if a client presents with a medical emergency this should be treated as such, i.e. call 999 for the most appropriate emergency service (police, fire, ambulance) or take them immediately to the nearest A&E department.

## **Cancellation, Absence and Holiday**

### **Therapist**

As The Pilgrim School Therapy Service operates as part of The Pilgrim School, therapy will only be offered within the published term dates of the school. The Therapy Service Manager and therapists are employed to provide the therapy service within these term dates and therefore any additional absence will be the result of unexpected illness or emergency, planned and authorised continued professional development or by prior arrangement.

In the event of unexpected absence of the therapist, therapy sessions will be cancelled directly with the client by the therapist or the Therapy Service Manager, under the instruction of the therapist. It will be the therapist's responsibility to contact their client caseload on their return in order to re-arranged cancelled sessions.

Where absence is planned (i.e. for CPD purposes), therapists will ensure that clients are notified at the earliest opportunity during their contact and subsequent appointments are arranged around the planned absence.

In the event of death or the incapacity of a therapist, a clinical will is in place to ensure onward support is provided to clients. Details regarding this procedure are individual to each therapist and can be requested at any time from the point of therapist allocation.

### **Client**

Should a client wish to cancel or be unable to attend their therapy session, contact should be made in advance of the session. Wherever possible, as much notice should be given as is practically possible, however, at the very latest the therapist should be notified on the morning of the appointment. For pupils, it is understood that absence will be recorded by the admin team in each base. Therapists will take responsibility for discreetly seeking this information for their caseload from the admin team. To assist student therapists, the Therapy Service Manager will oversee the attendance of their caseload and notify them should no clients be in attendance on their placement day, as required.

If cancellation notice is not given, and the client does not attend a scheduled therapy session then the therapist shall consider and record this as a "DNA" (Did Not Attend). In this situation, the therapist will endeavour to contact the client to discuss future intentions and commitment to therapy and, if appropriate, re-schedule another session. Should a client have 3 consecutive "DNA" sessions, the therapist will discuss with the Therapy Service Manager whether attempts to contact are continued or whether therapy is withdrawn. If therapy is withdrawn, a closing letter will be sent to the client notifying them of this.

Details regarding this cancellation and absence policy will be shared with clients as part of the verbal and written agreements at the start of therapy and then as appropriate throughout the therapeutic relationship.





Due to legislation brought in regarding pupil attendance in 2018, it is expected that clients within The Pilgrim School community will be available for appointments during term time in accordance with their confirmed, “provision offered” timetable, unless authorised in exceptional circumstances. This type of absence will be planned for and should be discussed between client and therapist during their regular contact.

## **Confidentiality**

The need to protect individuals is the paramount guiding principle in any decision made by the Therapy Service Manager and individual therapists.

The contents of each therapy session remains confidential between the client and therapist, unless there is a disclosure of current or previous child abuse, or the therapist considers that the client, or another individual, is at risk of significant imminent harm. Examples of significant harm could include self-harm and suicidal ideation/suicide attempts, and serious crime such as murder or assault.

In addition to the above, the therapists are required by law to report suspicions about terrorism, drug trafficking and money laundering. A therapist may be required to break client confidentiality if a court orders disclosure (see Access to Records).

Therapists are not required to pass on information about clients breaching agreements made with any organisation (e.g. school rules) or committing an offence, unless it is deemed that by doing so the therapist was aiding and abetting a crime (e.g. a pupil dealing drugs in school).

It is always the aim of therapists to obtain consent from the client to share necessary information. However, if a client refuses to give consent to share information, the need to safeguard the client and/or any other individual will always take precedence over the client’s right to autonomy.

In instances where the client is a child, information will be shared with parents/guardians at the earliest opportunity provided that to do so would not cause additional concern or harm to the individual or others, or impede an investigation, in line with The Pilgrim School Child Protection and Safeguarding Policy. This decision will be carefully considered by the aforementioned therapist and DSL(s)/Headteacher.

Therapists will share information about clients with third parties on a strictly ‘need-to-know’ basis; they will only disclose information that is vital in order to keep the client, and/or others, safe from harm.

Where there are serious concerns about a client (or third parties), therapists will follow procedures laid out in the school Child Protection and Safeguarding Policy and therefore will refer the concerns to one of the school’s Designated Safeguarding Leads and/or Head Teacher. These persons will, in consultation with the therapist and possibly other staff, make a decision regarding any further action to be taken.

Where practical and possible, therapists will make every possible attempt to communicate first to the client their intention to break confidentiality and to discuss the information that needs to be shared.





If such conversations cannot take place, the matter should be discussed with the client at the earliest opportunity following referral to the Designated Safeguarding Lead.

Therapists and school leaders will endeavour to keep the client informed of any further action that needs to be taken and will involve the client in the process as much as is possible without impeding any investigation required.

Therapists may seek specialist advice and guidance on safeguarding matters from their external supervisor.

### **Communication of Confidentiality**

The Therapy Service Manager and therapists will explain the level of confidentiality offered within the therapy service to prospective and current clients through:

- Verbal discussion at the initial assessment appointment, during any drop-in appointments and throughout the therapeutic relationship
- Use of the written therapeutic contract
- Briefly within information provided about the service to its prospective and new users
- At the point at which, or as soon as is practically possible, information needs to be shared within the terms set out above

Where applicable, therapists will explain the same information to guardians by forwarding them an information leaflet, a copy of the client contract and the Guardian Consent and Confidentiality Agreement within their introductory pack.

### **External Supervision**

As part of their commitment to being an ethical practitioner, therapists are required to undertake regular and on-going supervision with a suitably qualified supervisor external to The Pilgrim School community. Student therapists are also required to attend supervision with the Therapy Service Manager as part of their placement terms.

Supervision is a specialised, formal activity provided to 'ensure standards, enhance quality, stimulate creativity and support the sustainability and resilience of the work being undertaken' (Ethical Framework Glossary). It is an opportunity for therapists to discuss their client work to make sure that clients are safe and receive the best possible service. Supervision is an ethical requirement for therapists and does not mean that a therapist is not qualified, lacks experience or is under review of their performance. For more information on supervision, please see this [BACP "Good Practice in Action" guide](#).

The sharing of information within supervision sessions follows the usual requirements for, and limitations of, confidentiality that are observed in therapeutic practice. When discussing issues relating to client work during supervision, the therapist will take great care not to reveal the full name of a client or disclose any information which would enable the client, or those close to them, to be identified.



## **Record Keeping, Data Protection (GDPR) and Information Sharing**

The school therapy service keeps written and electronic records regarding clients who use or have used the therapy service. In addition to this, therapists are required to keep written session notes (also known as process notes). These records are kept to an absolute minimum for the protection of clients and are strictly confidential and exempt from disclosure to third parties, unless the service is legally required to do so or an access request is made.

Individual therapists are issued with and retain copies of client therapy records and session notes for the duration of their work with a client. During this time, they are required to maintain a split filing system with a minimum of 2 levels of security (i.e. locks). All therapists are expected to take due care and diligence over the storage of these records during this time and understand the severity of the implications on both the client and themselves should these standards not be upheld.

Employees and student therapists leaving The Pilgrim School will be required to sign a document confirming the handover and relinquishment of records and access to the Therapeutic Service documentation held as part of their role within The Pilgrim School.

## **Therapy Records**

Therapy records may include materials such as contact details, other agency involvement, reasons for referral to therapy, a log of communication, copies of letters and number of sessions attended. They may also include reports of safeguarding issues.

Therapists are responsible for ensuring that they record any child protection concerns which emerge during therapy. Records must follow the procedures of The Pilgrim School Child Protection and Safeguarding Policy and clearly document all discussions with the client and any third parties regarding the concerns, together with the key decisions reached during these conversations, actions to be taken and outcomes.

In addition to these records, therapists shall ensure that copies of any written reports supplied for the purpose of multi-agency meetings are filed appropriately with meeting minutes as part of a record for that meeting as well as within the individual's client record.

These therapy records are held electronically on the secure school system and in a locked filing cabinet. Only the allocated therapist and Therapy Service Manager have access to these records.

Therapy records are retained for a period which is informed by current GDPR legislation and good practice within the education sector. Currently, this means that therapy records for pupils are kept until the individual reaches an age of 25 years old. For other clients (e.g. staff, guardians), therapy records are retained until their "usefulness has expired" (as guided by BACP Good Practice in Action 067) which will be considered on an individual basis taking into account the time frame within which a client might return, the continued involvement with The Pilgrim School and the potential for any future legal proceedings. Typically, this will be for a minimum of 5 years from the end of therapy, however, may exceed this period if, for example, an individual continues to have access to The Pilgrim School Therapeutic Service through continued employment beyond this duration.



## **Client Session Notes**

In addition to therapy records, therapists are required to keep session notes for each client. These notes are anonymised and stored separately to the therapy records. Therapists do not keep detailed records regarding the content of individual sessions. However, they may keep session notes for the purpose of monitoring feelings generated by their work and to aid recollection of a session. These notes belong to the therapist and are destroyed (through a secure and confidential process) after an interval of 5 years. This is deemed sufficient time for a relevant re-referral to be made for an individual and/or for the therapist to make use of these notes for the purpose of supervision.

As above, client session notes for pupils will be retained until the individual reaches the age of 25 years old, at which point they will be destroyed with their therapy record.

## **Information Sharing and Access to Records**

### **Clients**

Under the Data Protection Act (2018), clients who access The Pilgrim School Therapy Service have the right to see information recorded about them by their therapist. This includes children and young people with the capacity to make their own decisions (i.e. Gillick Competent).

Where a child does not have the capacity to make his or her own decisions, then those with parental responsibility for the child will usually have the right to make decisions relevant to therapy, and under data protection law will also usually have the right to see the child's therapy records.

There are legal exceptions to this right, allowing therapist and school to withhold information if it is necessary in order to safeguard the health and safety of a child or others, or to safeguard a police or other investigation in the context of child protection or crime. In these situations, legal or other appropriate expert advice will be sought before data are disclosed to those with parental responsibility.

Clients cannot see information which is considered third party, or records concerning another individual, unless that person has given their explicit, written consent.

Where a client wishes to see their file, they should ask the therapist directly and the therapist should be present to explain what the files contains and why. This information should not be shared with anyone else, in line with the confidentiality policy. If a client has engaged in therapy with a student therapist who is no longer engaged in work with The Pilgrim School, requests should be directed to the Therapy Service Manager who will endeavour to follow-up this request and provide access to client files in the absence of the student therapist. In this circumstance it is likely that the Therapy Service Manager will be limited in the information they are able to provide beyond what has been written by the therapist.

Requests for access to a client's therapy record should be made in writing to the Head Teacher, briefly stating the reasons for the request and should be dealt with within 20 working days. *(NB. The 20-day period applies during term-time only. In the event of a request being sent during the school holidays, this period will begin on the first day of the new term).*



## **Guardians**

According to guidance from the Information Commissioner Office, under data protection law, legal guardians have an independent right of access to education records, despite objections by the young person, and school therapy records could be classed as such.

This could potentially lead to a situation in which a guardian seeks access against a client's wishes and, presumably, those of the therapist. In this instance, The Pilgrim School would seek to apply Schedule 3 of the Data Protection Act 2018, on the grounds that any such processing or disclosure could cause serious harm to the physical or mental health of the data subject (i.e. the client) or another individual. In this situation, The Pilgrim School will seek appropriate legal advice and/or the assistance of suitably qualified person.

Part 5 of schedule 3 of the Data Protection Act 2018 applies a separate additional exemption relating to maintaining the confidentiality of child abuse data.

Where a guardian requests to gain access to the client's therapy records, they should make these in writing to the Head Teacher, briefly stating their reasons. A request for access needs to be dealt with within 20 working days. *(NB. The 20-day period applies during term-time only. In the event of a request being sent during the school holidays, this period will begin on the first day of the new term).*

## **Professionals**

Many of the families and young people who are referred to The Pilgrim School are also supported by other professionals and subject to regular review meetings to share information, discuss progress and plan next steps. The Pilgrim School recognise that information sharing is essential to the effective support of the individuals and families they work with and will strive to navigate this in the most appropriate manner whilst respecting the crucial element of confidentiality offered to clients in therapy.

Information regarding an individual's access to, engagement with and involvement in therapy will be restricted to the sharing of data regarding attendance (including cancellations and DNA information) and number of sessions provided to date. This information will only be supplied providing that the individual in question has consented to this information being shared.

Understandably, this is with exceptions whereby information requested may be in relation to a safeguarding concern and will be considered as such in line with the confidentiality policy.

## **Court**

In the event of any court case involving a client, the Judge has power to subpoena therapy notes, or request that a therapy report is provided as evidence for the case.

School is under a duty to assert public interest immunity in respect of therapy records, so any part of court proceedings should name the Chair of Governors in a witness summons.

Where the court orders disclosure of therapy records, the school should contact their legal representative immediately who should communicate directly with the Judge about what is in the best interests of the client before a court hearing. Advice from the Local Education Authority may help limit the disclosure of confidential therapy material that is not relevant to the court proceedings.



## **Monitoring and Evaluation**

In order to report on, review, inform and develop the therapy service on offer to The Pilgrim School community, anonymous questionnaires will be completed before the commencement and at the end of therapy. These will be stored separately to individual client records and used purely for improvement of the service on offer and reporting on use of the service to the Governing Body of The Pilgrim School. Data used for this purpose will not be shared in any form that could identify individuals.

In addition to this, termly reports will be produced to share quantitative data about engagement with the school's therapeutic offer. These reports shall detail current numbers of clients engaged in therapy, broken down into the following categories: each base, home taught pupils, staff and parents. The report will provide information regarding how many clients have EHCPs and have attended more than 6 sessions. It will also detail the number of sessions offered each term and the number of cancellations within the same time period. The report will contain no personal details nor reasons regarding presentation to therapy.

Therapists may also make use of assessment tools (e.g. YP-Core) in order to monitor therapeutic change and outcomes of therapy. These assessment tools will not reveal any detail relating to the content of individual sessions, nor will they be shared with anyone other than the client or therapist without the explicit consent of the client.

## **Complaints Procedure**

If clients, or those supporting the client in any capacity, are not happy with any aspect of the therapy service, they have a right to make a complaint.

In the first instance, wherever possible, grievances should be brought to the attention of the therapist in the hope that issues can be resolved through discussion. If this is not appropriate, or the grievance is not resolved through this manner, formal complaints should be made in writing to the Therapy Service Manager, Assistant Pastoral Manager or Head Teacher who will follow The Pilgrim School's procedure regarding grievances against any of its employees.

If your complaint needs further attention, or is not resolved within the normal procedures of The Pilgrim School, you can address your concerns to the therapist's professional body;

- British Association of Counselling and Psychotherapy (BACP)  
<https://www.bacp.co.uk/about-us/protecting-the-public/professional-conduct/how-to-complain-about-a-bacp-member/>
- British Association of Art Therapists (BAAT)  
<https://baat.org/about/how-to-complain/>



## Appendix 1 – Key Principles of the BACP Ethical Framework

The following key principles are taken directly from the BACP Ethical Framework for Good Practice 2018 (<https://www.bacp.co.uk/media/3103/bacp-ethical-framework-for-the-counselling-professions-2018.pdf>) and underpin the work of counsellors in any setting. These core principles act as a basis for ethical decision-making within counsellors and, along with values and personal moral qualities, are often referred to as the guiding principles in any dilemma. The Pilgrim School Therapy Service operates within this framework and with due regard to the associated frameworks for any student creative therapists. Principles direct attention to important ethical responsibilities. Our core principles are:

**Being trustworthy:** honouring the trust placed in the practitioner

Examples:

Act in accordance with the trust placed in them

Strive to ensure that the client's expectations are ones that have reasonable prospects of being met

Honour their agreements and promises

Regard confidentiality as an obligation arising from the client's trust

Restrict disclosure of confidential information about clients to furthering the purposes for which it was originally disclosed

**Autonomy:** respect for the client's right to be self-governing

Examples:

Ensure accuracy within information given in advance of services offered

Seek freely given and adequately informed consent

Emphasise the value of voluntary participation of the services being offered

Engage in explicit contracting in advance of any commitment by the client

Protect privacy; protect confidentiality

Normally make any disclosures of confidential information conditional on the consent of the person concerned

**Beneficence:** a commitment to promoting the client's wellbeing

Examples:

Acting strictly in the best interests of the client based on professional assessment

Working strictly within one's limits of competence, training and experience

Using regular and on-going supervision to enhance quality of services provided

Commitment to updating practice by continuing professional development

NB. An obligation to act in the best interests of the client may become paramount when working with clients whose capacity for autonomy is diminished because of immaturity, lack of understanding, extreme distress, serious disturbance or other significant personal constraints.

**Non-maleficence:** a commitment to avoiding harm to the client

Examples:

Avoiding sexual, financial, emotional or any other kind of client exploitation

Avoiding incompetence or malpractice

Not providing services when unfit to do so due to illness or personal circumstances



Strive to mitigate any harm caused to a client even when the harm is unavoidable or unintended  
Challenging, where appropriate, the incompetence or malpractice of others

**Justice:** the fair and impartial treatment of all clients and the provision of adequate services

Examples:

Being just and fair to all clients and respecting their human rights and dignity

Considering conscientiously any legal requirements and obligations

Remaining alert to any conflicts between legal requirements and ethical obligations

Appreciation of differences between people and a commitment to equality of opportunity

Strive to ensure fair provision of services, accessible & appropriate to needs of clients

**Self-respect:** fostering the practitioner's self-knowledge, integrity and care for self

Examples:

Appropriately applies all of the above principles as entitlements for self

Includes seeking therapy and other opportunities for personal development as required

Using supervision for personal and professional support and development

Seeking training and other opportunities for continuing professional development



## **Appendix 2 – Referral Process & Referral Form**

### **Included:**

- **Therapeutic Support Referral Process**
- **Referral Form for Therapeutic Support**



# Therapeutic Support Referral Process





## PUPIL REFERRAL FORM for THERAPEUTIC SUPPORT

CLIENT DETAILS:			
Full Name:		Preferred Name & Pronouns:	
Date of Birth:		Year Group:	
Academic Link:		PSWS:	
The Pilgrim School Base:		Referral Date:	
Address (incl. Postcode):			
Contact Phone number:		Alternative Phone Number:	
Email Address:			
FSM:	YES / NO	EHCP:	YES / NO / PENDING

### CONTACT DETAILS

REFERRER DETAILS: (please complete if you are making a referral on behalf of the client named above)			
Name:		Contact Phone Number(s):	
Role:			
Email Address:			
I confirm that I have the consent of the client named above to submit this referral on their behalf.			
Signed:		Date:	

EMERGENCY/NEXT OF KIN CONTACT DETAILS (must be over 18):			
Name:		Relationship:	
Contact Phone Number:		Alternative Phone Number:	
Has this person been made aware of/involved in this referral?		YES/NO	

GP Contact Details:	
Name:	
Address:	
Telephone Number:	

PREFERRED THERAPEUTIC SUPPORT: (Please highlight)		
COUNSELLING	ART THERAPY	<del>DRAMA THERAPY</del> (CURRENTLY UNAVAILABLE)

### FURTHER INFORMATION

Briefly state reason for seeking support, including length of time concerns have been present:
--



<p><b>How do you hope support might help?:</b></p>
<p><b>Availability:</b> Please give times when you (the young person) are timetabled to be in school or include your current timetable.</p>
<p><b>Medication:</b> Please provide details of any medication you (the young person) are currently taking and when you began taking it.</p>
<p><b>History:</b> Please give details of any diagnosis, learning difficulties, mental health difficulties or relevant significant information. Please use additional paper as required.</p>
<p><b>Support:</b> Please provide details of any current support you (the client) have in place (e.g. Early Help, LA Young Carer Support, Youth Offending Team) and any previous support you have had. Include here whether you have previously received therapeutic support from The Pilgrim School (i.e. ELSA, Art Therapy, counselling)</p> <p>Are you (the client) currently engaged in or have you previously engaged with any talking therapy (e.g. CAMHS, private counsellor, CASY)? If so, please give details.</p>

A signature must be provided by the named client. By providing a signature, the client is agreeing to this information above being shared with the referral panel and a referral for counselling being made.

Signed: \_\_\_\_\_ (named client)      Dated: \_\_\_\_\_



## STAFF THERAPEUTIC SUPPORT REFERRAL FORM

### CONTACT DETAILS

<b>CLIENT DETAILS:</b>				
Full Name:		Preferred Name & Pronouns		
Date of Birth:		Referral Date:		
Home Address:				
Contact Phone number:		The Pilgrim School Base:		
Email Address:				
Preferred Method of contact:	EMAIL	TELEPHONE	TEXT	OTHER (please state):
Please indicate if you would prefer to be contacted outside of normal working hours? YES/NO				

<b>PLEASE INDICATE YOUR PREFERENCE FOR MODE OF COUNSELLING:</b>			
FACE-TO-FACE	VIRTUAL (ZOOM video Call)	TELEPHONE	ONLINE CHAT (via Zoom)

<b>EMERGENCY/NEXT OF KIN CONTACT DETAILS:</b>			
Name:		Relationship:	
Contact Phone Number:		Alternative Phone Number:	

<b>GP Contact Details:</b>	
Address:	
Telephone Number:	

### FURTHER INFORMATION

Briefly state reason for seeking support, including length of time concerns have been present:
--



**How do you hope support might help?:**

**Availability:** Please give times when you would be available for an appointment, during school hours where possible (8.30am – 4.30pm)

**Medication:** Please provide details of any medication you are currently taking and when you began taking it.

**History:** Please give details of any diagnosis, learning difficulties, mental health difficulties or relevant significant information. Please use additional paper as required.

**Support:** Please provide details of any current support you have in place and any previous support you have had.

Are you currently engaged in or have you previously engaged with any talking therapy (e.g. Steps2Change, private counsellor/therapist)? If so, please give details.

A signature must be provided by the named client. By providing a signature, the client is agreeing to a referral for counselling, the information supplied in this document being stored securely and contact being made via the details supplied.

Signed: \_\_\_\_\_ (named client)

Dated: \_\_\_\_\_



# GUARDIAN THERAPEUTIC REFERRAL FORM

## CONTACT DETAILS

<b>CLIENT DETAILS:</b>				
Full Name:		Preferred Name & Pronouns:		
Date of Birth:		Referral Date:		
Child's Name & Pilgrim School Base:				
Address (incl. Postcode):				
Contact Phone number:		Alternative Phone Number:		
Email Address:				
Preferred Method of contact:	EMAIL	TELEPHONE	TEXT	OTHER (please state):
Please indicate if you would prefer to be contacted outside of normal working hours? YES/NO				
<b>PLEASE INDICATE YOUR PREFERENCE FOR MODE OF COUNSELLING:</b>				
FACE-TO-FACE	VIRTUAL (ZOOM video Call)	TELEPHONE	ONLINE CHAT (via Zoom)	

<b>EMERGENCY/NEXT OF KIN CONTACT DETAILS:</b>			
Name:		Relationship:	
Contact Phone Number:		Alternative Phone Number:	

<b>GP Contact Details:</b>	
Name:	
Address:	
Telephone Number:	

## FURTHER INFORMATION

Briefly state reason for seeking support, including length of time concerns have been present:
--



**How do you hope support might help?:**

**Availability:** Please give times when you would be available for an appointment, during school hours where possible (8.30am – 4.30pm)

**Medication:** Please provide details of any medication you are currently taking and when you began taking it.

**History:** Please give details of any diagnosis, learning difficulties, mental health difficulties or relevant significant information. Please use additional paper as required.

**Support:** Please provide details of any current support you have in place and any previous support you have had.

Are you currently engaged in or have you previously engaged with any talking therapy (e.g. Steps2Change, private counsellor/therapist)? If so, please give details.

A signature must be provided by the named client. By providing a signature, the client is agreeing to a referral for counselling, the information supplied in this document being stored securely and contact being made via the details supplied.

Signed: \_\_\_\_\_ (named client)

Dated: \_\_\_\_\_



## **ADDENDUM TO THERAPY SERVICE POLICY – REMOTE ACCESS**

### **The Pilgrim School Therapy Service**

The Pilgrim School acknowledges that for a significant number of their community, access to face-to-face therapy inside a school building, during school hours is neither possible nor appropriate due to a range of factors including, but not limited to, mental health, physical health and geographical location. The Pilgrim School is committed to providing fair and equal access to a school therapy service which is delivered in a responsive way to meet the needs of individual clients, ensures appropriate safeguarding measures for the therapist and client, and maintains levels of confidentiality which are essential to the therapeutic process. This addendum aims to set out how The Pilgrim School Therapy Service hopes to achieve this.

### **Alternative Platforms for Therapy**

Wherever possible, it is preferred that therapy takes place within The Pilgrim School environment, even for clients who do not regularly attend for education purposes. Face-to-face contact is difficult to replicate and offers the most supportive, immediate form of therapy. In addition to this, the school environment offers a neutral venue with additional support in terms of safeguarding procedures, security and additional support resources. Because of this, the possibility of accessing therapy at The Pilgrim School will be explored with every client and wherever possible, clients (supported by their guardians) will be encouraged to attend therapy appointments face-to-face at their nearest Pilgrim School base. This should/will not impact on the expectation of a pupil educationally as the understanding across the school is that of the varying impact of circumstantial expectations on an individual; attendance for a therapy appointment does not indicate capacity to attend for educational purposes.

Where face-to-face contact is not possible, access to therapy via virtual means will be explored and the suitability and possibility of telephone or virtual sessions (via video-calling) will be discussed. The therapist has access to a confidential telephone line for the purpose of telephone therapy and in the event of a video-call, the Teams platform will be used.

At this time, we are not able to consider face-to-face appointments in the home. Thorough discussion and risk assessment is ongoing and updates regarding this provision will be completed by the Therapy Service Manager. Developments with regards to this will be communicated with the school community in due course.

### **Video-Calling Therapy via Teams**

Video-calling enables a therapist to engage directly with a client and offers the closest medium to working face-to-face. Where video-calling is identified as the appropriate means of therapy, appointments will be scheduled via email. An invitation to a Teams Meeting will be sent to the client which contains a hyperlink to the meeting. The therapist will utilise the “lobby” facility to ensure that unauthorised access is not permitted.

At the time of the scheduled appointment, the therapist will “admit” the client to the meeting so that the session can begin. If the client does not attempt to join during the first 15 minutes of the session, the therapist will attempt to make contact by telephone. If this attempt is unsuccessful, an email will be sent to the client inviting them to reschedule the appointment. Should the client not respond within one week of this email, the therapist contract will end and the client will be notified in writing.

Despite the many benefits that technology can bring, there is also the potential for disruption and error. On occasion, unavoidable technical problems may arise and there will be a need for both client and therapist to respond flexibly. Where possible, alternative arrangements will be arranged so that the scheduled session can take place with minimal disruption, for example switching from a video appointment to a telephone appointment. Where this is not practical or appropriate, it may be necessary to cancel the appointment and re-schedule.





## **Telephone Therapy**

Some clients might feel they can't engage safely or privately using video, in these circumstances, and if assessed as appropriate, audio function or telephone therapy may be offered.

Where telephone therapy is identified as the most appropriate means, appointments will be scheduled via email. The therapist will store client contact numbers under an alias on their phone and will call from a withheld or dedicated work number in order to maintain suitable boundaries.

In the event that contact cannot be made at the scheduled appointment time, the therapist will make 2 further attempts to contact the number supplied within a 15-minute period. If there is no answer during this time, the therapist will contact the client via email or text message (as agreed during contracting) in order to invite them to re-scheduled the appointment. Should the client not respond within one week of this email, the therapy contract will end and the client will be notified in writing.

## **Referrals & Assessment**

Referrals for remote access to the therapy service should be made using the usual Referral Forms for Therapeutic Support. Details given on the referral form should indicate that the client does not currently attend a Pilgrim School base and further information should be provided regarding any difficulties in accessing a base for therapy.

Once received, the referral will be assessed by the Therapy Service Manager. Individual circumstances will be established, a risk assessment completed using information made available to the school and next steps agreed.

If therapy is to be offered, an assessment appointment will be scheduled with the client via email. Wherever possible, it is preferred for this assessment to take place face-to-face, even if subsequent therapy sessions do not take place in this manner. If this is not possible, an appointment via telephone or video-call will be arranged.

In order for virtual therapy to take place, it is essential that the therapist has immediate access to emergency contact details, current location and GP details in case of emergency. These must be requested and obtained by the therapist via email prior to the assessment appointment.

In addition to the usual content of an assessment appointment, the therapist will discuss with the client the likelihood of privacy and confidentiality being able to be maintained within their environment. The therapist will inform the client that they cannot be held responsible for any breaches in confidentiality as a result of the client's environmental factors and therapy will only take place if the therapist is satisfied that confidentiality, and client safety, can be maintained.

The therapist will also explain that the client should prepare themselves for any appointments in much the same way as if they were attending face-to-face (i.e. have a drink available, put phone on silent, minimise disruptions and distractions) and highlight the importance of sharing information regarding changes to their circumstances. A document outlining this information will be provided to clients prior to the assessment appointment.

The therapist will agree with the client a strategy for communicating should confidentiality be breached during the session.

## **Risk Assessment**

Due to a number of factors, the level of risk involved in offering remote therapy is heightened. It is therefore necessary for additional considerations to be risk assessed prior to agreeing to offer therapy to a client in this way and as part of the on-going contracting at the start of each session. At this time, due to the additional complexities involved and effectiveness of therapy via this medium, remote therapy will not be offered to clients of primary school age (i.e. under 11 years old).

Additional information from the client and/or referrer will be sought by the Therapy Service Manager in order to complete a risk assessment prior to the initial assessment appointment. The information gathered as part of this risk assessment will be compiled with details from the initial assessment appointment so that a thoroughly informed decision can be made about the best way to proceed.



Prior to the initial assessment appointment, the client will be asked to supply contact details for an emergency contact (i.e. next of kin) and their GP. They will also need to provide the address at which they will engage in therapy sessions, an email address and direct telephone number.

During the initial assessment appointment, in addition to the information which is typically discussed, the therapist will explain the additional limitations of confidentiality (i.e. that they cannot control the client's environment and so are reliant on effective, honest and assertive communication regarding interruptions and any risks posed) and what procedures will be followed in the event of a disclosure, safeguarding concern, emotional distress or emergency.

At the start of each appointment, the therapist will establish a safety boundary checklist as part of the re-contracting process. This will include confirming the client's exact location and who else is at that location with them – either nearby or not, and agreeing what will be done if they are interrupted or disconnected.

Remote therapy sessions will only take place during school hours in order to ensure that safeguarding protocols can be effectively followed should the need arise.

## **Confidentiality**

As with face-to-face therapy sessions, confidentiality is a fundamental component in the success of therapy carried out remotely. However, unlike face-to-face therapy there is greater risk posed by environmental factors which lay outside of the therapist's jurisdiction and the geographical distance between client and therapist.

Therapists will do their part to ensure confidentiality is upheld when sessions are carried out remotely. In addition to the usual confidentiality measures, therapists will ensure the following:

- Remote therapy sessions are carried out in a private room, free from interruption, disruption and distraction
- The therapist will use headphones to enhance the contact between client and therapist, ensure clarity of dialogue and further reduce the risk of being overheard
- A secure platform is used for remote therapy sessions
- Clients' personal telephone numbers are only stored on any mobile device used by the individual therapist working with that client and are saved under an alias
- Remote therapy sessions take place using The Pilgrim School resources (laptop/mobile phone) and through the secure systems in place
- Video-call sessions are not recorded or stored for any purpose by either party (i.e. client or therapist)

In addition to the above, therapists will support clients to ensure confidentiality within their personal environment. Therapists will encourage clients to access sessions in a safe and private space, away from distractions. If possible, clients will be encouraged to use headphones to lessen the risk of a two-way dialogue being overheard. Clients and therapists will work together to agree a protocol in the case of a session being interrupted or privacy being compromised.

Additionally, during the initial assessment and contracting, clients will be informed of what to do should it not be possible for them to access their therapy safely or in confidence. Clients will be advised to make contact via email or text in order to notify the therapist that they need to re-schedule.

Whilst confidentiality of the content of sessions is of the upmost importance, in the instance of therapy being accessed remotely, confidentiality in relation to access to and engagement with therapy cannot be guaranteed. Indeed, in most instances it is preferable for someone living with the client (or in the immediate vicinity) to be aware that therapy is being accessed, as well as when and how they are engaging in therapy so that additional, appropriate support can be offered around these times.

To this end, in the case of the client being a pupil at The Pilgrim School, The Pilgrim School Therapy Service must obtain additional agreement from a guardian with regard to supporting and facilitating access to therapy either remotely or by bringing the client to a Pilgrim School base.

On occasions where a client does not wish for a guardian to be made aware of their engagement in therapy, further consideration will be given to the appropriateness of remote access, taking into account the needs of the individual, any potential risk posed



and the potential impact of not having access to the therapy service. Further to this, additional means of support may be explored in order to enable safe and confidential access to the service for each individual.