



The Birchall Trust

Supporting Survivors of Rape & Sexual Abuse
in South Cumbria & North Lancashire

Charity no. 1109637 Company no. 5424196

Policies and Procedures Handbook

Introduction to Policies

The Birchall Trust (formerly known as South Cumbria Rape & Abuse Service) has undertaken a review of its policies in line with current legislation.

A consultant was employed to work with members of the organisation to establish policies that are relevant to the operation of the charity as well as legally compliant.

These policies will be constantly reviewed and updated in the context of changing legislation and service development.

The contents page has been divided into sections for easy reference.

- Section A contains policies relevant to personnel.
- Section B contains policies relevant to service provision.
- Section C contains overarching policies.

The appendix contains an overview of the service.

As a working member of the organisation, please sign that you have received a copy of the policies and that you agree to comply with these policies.

Signature Date

Please print name

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Contents

Content	Page number
SECTION A - Personnel	
1. Recruitment and selection policy	7
2. Induction policy	13
3. Probation policy	16
4. Staff training and development policy	19
5. Expenses policy	21
6. Management supervision policy	22
7. Lone working policy	24
8. Use of emails and other Information Technology	27
9. Misuse of alcohol and drugs by staff policy	28
10. Disciplinary policy	30
11. Grievance policy	32
12. Harassment policy	34
13. Sickness policy	37
SECTION B - Service provision	
1. Access policy	38
2. Safeguarding Children Policy	40
3. Complaints policy	43
4. Confidentiality policy	45
5. Confidentiality statement	47
6. Clinical supervision policy	48
7. Vulnerable adults policy	50
8. Withdrawal and refusal of service policy	52
9. Access to volunteer counsellors records	55
SECTION C - cross cutting / overarching policies	
1. Data protection policy	57
2. Equality and diversity policy	59
3. Health and safety policy	63
Appendix – Service overview	
	68

Section A policy 1 Recruitment and Selection Policy and Procedure

POLICY

The recruitment of high quality staff and volunteers is crucial to the objectives and continued success of THE BIRCHALL TRUST. This guidance is designed to assist managers to recruit and select the best candidate in a fair and consistent manner and in accordance with other organisational policies. Underpinning this approach is the need to provide equality of opportunity in employment. THE BIRCHALL TRUST recognises the skills and abilities of all people regardless of their sex, sexual orientation, marital status, race, religion, age, creed, colour or nationality. This includes equal treatment of existing staff, who are considered for promotion or acting up arrangements.

This guidance is designed to assist managers or Trustees to recruit and select the best candidate for the post. In doing so it also enables you to take account of:

- The organisation's equal opportunities policy
- Legislation including the Sex Discrimination Act 1975, Race Relations Act 1976, the Disability Discrimination Act 1995, the Data Protection Act 1998 the Race Relations Amendment Act 2000 and the Employment Equality (Sexual Orientation and Religion or Belief Regulations) 2003 (Appendix B)

Each individual responsible for recruitment and selection should ensure this policy is carefully followed.

Scope

THE BIRCHALL TRUST policy is that all vacancies, irrespective of funding source, should normally be advertised to ensure the widest possible pool of applicants. As a **minimum** this normally includes advertisement internally on organisational notice boards, local colleges and where funding allows in local newspapers.

PROCEDURE

Recruitment approval process

In order to advertise opportunities the Manager will need to seek approval from the Board of Trustees.

New posts and role vacancies

The occurrence of a vacancy is an opportunity to review the need for the post and its duties, responsibilities and grade.

Where the duties of the post have changed significantly the Board of Trustees or Manager must provide a new job description and person specification, ideally before financial approval is sought.

The following recruitment procedures should be followed;

Job / role Description

A job / role description is a key document in the recruitment process. The job description must be produced for every vacancy and drafted prior to taking any other steps in the process. The job description sets out the main duties and responsibilities of the position and has a number of purposes

- It indicates to potential candidates the range of duties and responsibilities of the post
- It is used during supervision / appraisal to help evaluate the performance of an individual.
- It is a tool for performance management to ensure that the post holder is fulfilling the appropriate duties to a required standard

The language in job descriptions should:

- Avoid jargon and unexplained acronyms and abbreviations
- Be readily understandable to potential applicants to the post
- Avoid ambiguity about responsibilities and be clear about the post holders accountability for resources, staff, etc

Person Specification

The person specification is of equal importance to the job description and informs the selection decision. The person specification details the minimum skills, experience and abilities that are required to do the job. It should be drawn up after the job description and, with the job description should inform the content of the advert.

The person specification should be specific, related to the job / role, and not unnecessarily restrictive for example only qualifications strictly needed to do the job should be specified.

The inclusion of criteria that cannot be justified as essential for the performance of the job / role may be deemed discriminatory under race and sex discrimination law, if equal proportions of men and women and those of from different racial groups could not meet them.

The person specification enables potential applicants to make an informed decision about whether to apply and those who do apply, to give sufficient relevant detail of their skills and experience in their application. The person specification forms the basis of the selection decision and enables the appointment panel to ensure objectivity in their selection.

The person specification details the:

- Education/Qualifications and Training
- Knowledge/Skills
- Previous experience
- Personal Characteristics/Other requirements

For some jobs role a particular qualification(s) may be essential, while for others no single qualification may be appropriate and a particular type of experience may be just as relevant as a formal qualification. Where qualifications are deemed essential these should reflect the minimum requirements necessary to carry out the job to an acceptable standard.

The type of experience required of applicants should be specified.

Further Details for applicants

The further details provided to an applicant will be as follows

- Advertisement
- Information about THE BIRCHALL TRUST and the post
- Job description and person specification
- Summary of the terms and conditions of service
- Application procedure
- Application form
- Equal opportunities monitoring form

Disclosure

All candidates are required to disclose whether they have a current conviction. Such a criminal record will only be taken into account for recruitment purposes, where the conviction is relevant to the position being applied for, and where this is the case, will not necessarily bar candidates from employment. Any decision will depend on the precise nature of the work and the circumstances and background to the offence(s).

Under the Rehabilitation of Offenders Act 1974 ex-offenders do not have to disclose spent convictions. However, there are some exceptions. Under the Exceptions Order 1975 of the Act, employers are entitled to ask candidates to reveal details of all convictions: **current** and **spent** for certain excepted professions; offices and employments and regulated occupations. Included within the above group are 'positions of trust': those roles that fall within the definition of (i) working with children and/or (ii) vulnerable adults. For these positions, employers have access to a new service called **Disclosure** offered by the Criminal Records Bureau (CRB). This service checks whether the successful candidate has a criminal record by accessing a variety of records held on the Police National Computer, by the Department of Health (DH) and/or the Department for Education and Employment (DfEE).

Publicising the Vacancy

All posts must be advertised on the organisations notice board and internal newsletter and where funding allows in local newspapers.

The Commission for Racial Equality and the Equal Opportunities Commission advise that 'word of mouth recruitment' is likely to be indirectly discriminatory in terms of race and/or sex discrimination. It is very important therefore that all posts are advertised as widely as possible and that all applicants are dealt with in the same way and given the same information and opportunity to make an application.

External advertisements will have a closing date of at least 2/3 weeks after the date of publication.

Processing applications

The individual responsible for recruitment will need to make their staff aware that when dealing with enquiries about vacancies it is unlawful to state or imply that applications from one sex or from a particular racial group would be preferred and to do so may lead to a complaint of race or sex discrimination against the organisation.

Care must also be taken when initiating contacts with applicants to ensure that all applicants are treated in the same way, for example with regard to invitations to visit the organisation, informal meetings to discuss the vacancy, and provision of information.

The confidentiality of applications must be respected by all those involved in the selection process.

Interview Panels

All interviews must be conducted by a panel. The Chair of the Board of Trustees and Manager should select interview panel members prior to the closing date and preferably prior to advertisement of the post. This allows panel members to assist in the short listing process.

Panels must:

- Consist of a minimum of two people including the immediate line manager of the vacant post, a colleague who is familiar with the area of work and, where appropriate, a third person.
- Consist of staff who have received training in recruitment and selection
- Reflect a sex and ethnicity balance wherever possible
- Declare if they already know a candidate
- Be willing and able to attend all interviews for the duration of the recruitment process, to maintain consistency and to ensure fair treatment of all candidates

Monitoring

To ensure the organisations Equal Opportunities policies are working to benefit all concerned, it is considered good practice to keep up to date information on how staff groups are made up (e.g., gender, religion or belief, ethnic groups, those with disabilities, sexual orientation). Therefore THE BIRCHALL TRUST asks all applicants to complete an equal opportunities monitoring form as part of the application process.

Access to this information will be restricted to a limited number of authorised staff. The information may also be used for the purposes of compiling employee statistics and equal opportunities monitoring.

Short listing

After the closing date has passed short-listing for interview should take place. Short listing should be carried out by at least two members of the interview panel, including the immediate line manager. The composition of the short listing panel will depend on the nature and seniority of the post.

It is the responsibility of the short listing panel to ensure candidates are measured against the requirements outlined in the person specification. Short listing decisions should be based on evidence that the applicant has met the requirements of the person specification. Short listing panel members should avoid dismissing applicants who appear to be over qualified.

Assumptions should not be made about their reasons for applying for the post as they may eliminate an otherwise exemplary candidate. Consideration of the neatness of the application form for e.g. the neatness of their handwriting should not be the basis for short listing unless the neatness of their handwriting is desirable for the post. A person with a disability may have some difficulty in producing a neatly written document and have no access to a typewriter or a person who can assist them.

Whatever documentation is used the manager who is recruiting is responsible for recording decisions taken against the agreed criteria and retaining this. The original applications for all applicants, together with a written note of the reasons for short listing or rejecting applicants must be retained for six months from the date that an appointment decision is made, in case of a complaint to an Employment Tribunal.

Selection Tests and Presentations

Consideration should be given to using job related selection tests or asking candidates to give presentations as part of the selection process if there are some areas of the person specification that are difficult to test at interview.

If selection tests or presentations are to be used, all candidates should be given the same written information as to how long they will take, the topic area(s) they will be cover, and what if anything they should prepare in advance. Care should be taken to ensure that job related tests are well explained in writing for candidates, in plain language, that all candidates are subject to the same tests under exactly the same conditions, and that presentation topics do not favour any one candidate.

Selection tests should be carefully considered - a person with a disability may be capable of the task but find the time constraints difficult, due to the nature of the disability; make allowances for this if the job does not require such quick responses.

Arrangements for Interviews

To invite short-listed candidates to interview the following information is needed:

- What the interview will consist of
- Where the presentation test will take place
- What visual aids will be available for presentations
- Where and to whom candidates should report on arrival at THE BIRCHALL TRUST.

Interviews should be scheduled as soon after the closing date as reasonably possible, as delays are likely to lead to a loss of candidates.

Letters or e-mail to **all** shortlisted candidates should include:

- Date, time and place of their interview
- Instructions on how to find their way to the interview venue
- A request that they contact the author of the letter/message if they have any special requirements in relation to the interview (related to access to the venue or any other special need related to disability)
- If appropriate details of any test or presentation they will be required to take or anything they should bring with them (e.g. examples of work or proof of qualifications that are essential to the post).

Interviewing

The structure of interviews should be decided in advance. The Chair of the panel will agree and record with the appointments panel a format for the interview. This format should include:

- A welcome by the Chairperson
- An introduction to the panel members
- A brief explanation of the interview format
- A questioning session with reference to the person specification for the post
- A section where candidates are offered the opportunity to ask any questions

This will include the questioning areas to be explored by each panel member by reference to the person specification for the post. The same areas of questioning should be covered with all candidates and

assumptions should not be made regarding the expertise or abilities of candidates because of their employment history.

Interview questions should be phrased so that they do not favour any one candidate. Supplementary questions should be used to probe for further information or clarification where answers are incomplete or ambiguous.

Care must be taken to avoid questions that could be construed as discriminatory for e.g. questions about personal circumstances that are unrelated to the job. It is, for example, legitimate to ask for confirmation of whether individuals can comply with the working patterns of the post but not to ask details of their domestic or child care arrangements etc. It is the responsibility of the Chair of the panel to ensure that such questions are not asked.

Where a candidate being interviewed has a disability for which adjustments may need to be considered, the candidate's requirements should be discussed with him/her once the planned questioning is complete. The outcome of these discussions must not influence the consideration of the candidate's application

Interview notes must be taken to help the panel to make an informed decision based on the content of the interview. Such notes must relate to how candidates demonstrate their education knowledge, skills and experience in relation to the person specification. The Data Protection Act allows applicants to request disclosure of such notes in the event of a complaint and an Employment Tribunal would expect the Institute to have notes of every selection decision. The lack of such notes would seriously impede the organisations ability to contest such a complaint. Any inappropriate or personally derogatory comments contained within the notes could be considered discriminatory and are unacceptable.

Making a decision

The information obtained in the application, the interview, and any selection tests (and references if they have been obtained beforehand) will allow candidates to be assessed against the person specification and a selection decision to be made. The assessment must be made on evidence not unsubstantiated 'feelings'.

The Chair of the panel must ensure that a written note of the reasons for selecting the successful candidate and rejecting others is made and placed on the recruitment file together with the original applications, short listing notes, interview notes of all panel members and selection tests if used.

The appointments panel must be satisfied that the approach to the selection procedure and the final decision can be justified at a later date. The panel must also be aware that they may be required to justify their original decision perhaps several months after the selection process has taken place to an Employment Tribunal.

Only a provisional offer can be made to the preferred candidate, ie making it clear that the offer is subject to satisfactory references being received and disclosure checks or occupational health clearance, where appropriate.

References

References are normally taken up by the recruiting manager and the following needs to be taken into account:

- Where an applicant indicates that s/he does not want wish his/her current employer to be contacted prior to interview this should be respected.
- Telephone references should be avoided but, where time pressures or the location of referees dictate that this may be appropriate, recruiters should ensure that they are certain as to the identity of the person to whom they are speaking. When conducting telephone references, it is helpful to plan the conversation beforehand and to have a list of questions ready. A file note should be made at the time of the telephone conversation and written confirmation should always be requested.
- Referees who respond by fax or e-mail should be asked to provide a hard copy of their reference on headed paper.
- References are confidential and must be sought 'in confidence'.

References should only be used for the purpose for which they were intended and their confidentiality must be maintained. Panel members must return all copies of any references with the application forms and their interview notes to the Chair on completion of the recruitment exercise. References **must** only be kept on the recruitment file and the personal file held in the main office.

Appointment

Offers/ Appointment letters/Salary

Verbal offers of appointment are normally made by the Chair of the panel.

Induction

It is THE BIRCHALL TRUST policy that the Manager ensures that all members of staff - whether they are new to the organisation or moving to a new role from within – go through an induction process so that they gain an understanding of their work and potential contribution to the organisation

The **induction policy and procedure (A2)** sets out this process.

Section A policy 2 Induction policy and procedure

POLICY

THE BIRCHALL TRUST recognises that its staff / volunteers are fundamental to its success. To enable all staff and volunteers to become effective and efficient in their role as quickly as possible, it is essential that all staff new to the organisation, or the role, receive a timely induction.

THE BIRCHALL TRUST places critical importance on thorough induction procedures which make new staff feel welcome, valued and settled in their new role. This then forms the basis from which staff can quickly get up to speed, perform their duties effectively and begin to make a contribution to the organisation.

Scope

This policy relates to all newly appointed staff / volunteer counsellors and to existing staff / volunteer counsellors who have taken on a new role within THE BIRCHALL TRUST. Staff are expected to be proactive in their own induction, and ensure that they receive from appropriate sources, the relevant information and support that enables them to apply themselves to their role and fully contribute to the success of the organisation

Aims of the policy

The policy aims to set out the organisations approach to induction and to indicate how appropriate inductions can be provided.

The policy encompasses several strands of Induction:

- Student counsellors
- Volunteer and freelance counsellors
- Paid and freelance staff

PROCEDURE

Induction follows the recruitment and selection of suitably qualified individuals. Details of the recruitment and selection procedures for both Volunteer counsellors and paid staff are provided in the **Recruitment and Selection policy and procedure document (SECTION A policy 1)**.

The aim is to allow paid staff and volunteers to orientate and understand the organisational culture so that they can work comfortably and effectively in it.

Induction enables the individual to:

- consolidate their understanding of the duties and responsibilities of the role
- understand the expectations of them in the form of standards, objectives or a work portfolio, set with their line manager
- understand how their work performance will be monitored (including probation and performance review processes)
- discover the information and support that is available to them, including mentoring and key contacts
- highlight areas where training and development would be appropriate
- apply their skills and knowledge to performing the role and demonstrate that they successfully meet probation requirements

During the job induction staff must be made aware of the **Probationary procedure (SECTION A policy 3)** and that records of induction activities may be used to support the probationary process.

Responsibility for induction falls with the line manager, though specific activities may be delegated at the line manager's discretion. It is good practice for individuals and line managers to retain records of completed induction activities.

Guidance on Induction Programmes

Induction arrangements apply wherever someone undertakes a new role, or has been absent for a long period e.g. return from maternity leave.

Before the employee / volunteer starts work the Line Manager needs to ensure that they have planned out the activities for the induction. Use the Induction Checklist to help you.

On the first day the Manager should meet with the employee / volunteer to outline the activities for that day. The first day activities should include the following:

- A tour of the organisation buildings / offices
- Opportunity to meet immediate work colleagues
- Know where work is carried out
- Know where personal possessions are stored
- Check that each employee / volunteer has resources they need to do the job (e.g. office, computer, IT password, specialist equipment)
- Checking that each employee knows how to use equipment in regular use (e.g. photocopier).
- Checking understanding of use of specialist equipment in immediate use and identify any training needs
- Organisational health and safety requirements
- Social routines e.g. tea/coffee, lottery, birthdays etc...
- Planned lunch arrangements with manager and/or colleagues

Activities will be determined by the nature of the job but by the end of week one should include the following:

- Training in specialist equipment
- Work tasks and activities
- Understand any organisational procedures e.g. reporting sickness, annual leave, leave of absence, financial regulations
- Understand how the job fits into the organisation as a whole
- Understand who important work contacts are and how to reach them
- Understand how to access the tools needed to do the job
- Identify training needs

The Manager should meet the new employee / volunteer at the end of their induction to assess how things have gone and to answer any questions the employee / volunteer may have.

All employees / volunteers need to be able to work in a safe and healthy manner

People can take in only so much information at any given time, and should not be overloaded

If there are special health and safety requirements make sure the employee / volunteer fully understands their importance

Induction checklist

New employees or volunteers should have a copy of this checklist – this enables them to follow what is happening and will act as a reminder of anything missed or that needs particular attention. It should be the responsibility of both the manager and the new starter to ensure that all relevant items are properly covered during the induction period.

Name

Starting date

Introduction to THE BIRCHALL TRUST
<input type="checkbox"/> History
<input type="checkbox"/> Organisational structure
<input type="checkbox"/> Future plans and developments
The Role
<input type="checkbox"/> Introduction to other staff
<input type="checkbox"/> Tour of buildings
<input type="checkbox"/> Requirements of new job
Personnel documentation and checks completed
<input type="checkbox"/> Personal details form including emergency contact details
<input type="checkbox"/> Copies of qualifications and accreditation including CRB check
<input type="checkbox"/> Bank details (if needed for payment of salary/wages)
Terms and conditions of employment explained
<input type="checkbox"/> Contract of employment or letter of confirmation issued and signed
<input type="checkbox"/> Probationary period
<input type="checkbox"/> Hours of work and work breaks
<input type="checkbox"/> Clocking on/flexi time procedures
<input type="checkbox"/> Pay and Payment procedures
<input type="checkbox"/> Expenses
<input type="checkbox"/> Holidays and sick leave entitlements and procedures
<input type="checkbox"/> Other leave
<input type="checkbox"/> Time off from work – maternity, paternity, flexible working
<input type="checkbox"/> Training and development
<input type="checkbox"/> Line management and Supervision
<input type="checkbox"/> Reviewing work performance
<input type="checkbox"/> Grievance procedures
<input type="checkbox"/> Disciplinary procedures
<input type="checkbox"/> Termination of employment procedures
Health and safety
<input type="checkbox"/> Awareness of hazards
<input type="checkbox"/> Safety rules
<input type="checkbox"/> Emergency procedures
<input type="checkbox"/> Location of exits
<input type="checkbox"/> Clear gangways, exits
<input type="checkbox"/> Reporting of accidents
<input type="checkbox"/> Reporting of hazards
<input type="checkbox"/> First aid
<input type="checkbox"/> Personal and workplace hygiene
Welfare and employee benefits/facilities
<input type="checkbox"/> Policy/procedures to prevent bullying and harassment
THE BIRCHALL TRUST rules
<input type="checkbox"/> Smoking policy
<input type="checkbox"/> General behaviour
<input type="checkbox"/> Telephone calls
<input type="checkbox"/> Standards expected

Section A policy 3 Probation policy and procedure

Policy

THE BIRCHALL TRUST recognizes the importance of ensuring that we recruit the right individuals for our organisation both in terms of how they fit with our values and working practices and how our organisation fits with their workplace / placement expectations. These guidelines are designed to provide guidance on the operation of probation periods, ensuring consistency of treatment across the organisation.

The aim of probation is to ensure that performance of new employees / volunteers is assessed fairly across the organisation, and that appropriate training and support is provided.

Scope

These procedures are applicable to all new staff or volunteers provided with a placement by the organisation.

If an employee's / volunteers performance is sub-standard due to negligence, lack of application or misconduct then the matter will be dealt with under the **disciplinary procedures (section A policy 10)**. Disciplinary records will be taken into account in considering whether the requirements of probation have been met.

Matters relating to absence will be dealt with under the **Management of Sickness Absence Procedures**. Absence records, excluding absence relating to disability or pregnancy/maternity, will be taken into account in considering whether the requirements of probation have been met.

Procedure

On joining the organisation an employee or individual will serve a 12 week probationary period. During this time the Manager should assess the employee / volunteer capabilities, attitude and potential. At the same time the employee / volunteer can make their mind up about whether they wish to remain working with the organisation.

If the employee / volunteer does not do not reach the standards required by the organisation their employment / placement may be terminated at any time during the 12 week probationary period, or the probationary period may be extended beyond 12 weeks.

The line manager will meet with the employee / volunteer on a regular basis as part of regular work routines. However there are key times when the line manager needs to meet and discuss progress as part of the probation process.

The line manager should meet at the end of the first month, the end of the second month and the end of the third month. At each meeting the line manager and employee / volunteer should review work to date, identify any areas of improvement and identify any support that can be provided. A brief record of the meetings should be made and the employee / volunteer should receive a copy.

Where performance is not as expected this should be clearly identified, targets for improvement set and clear systems of support identified. If performance standards do not improve the formal probation procedure shown below should be followed.

Formal probation procedure

A formal meeting will be held to discuss the employee's / volunteer's performance and the consequences for the probation period. The employee / volunteer will be given five working days notice of the meeting and be advised of her/his entitlement to be accompanied by a trade union representative or friend. A Trustee will also be present to advise on procedural issues.

Evidence of how performance is unsatisfactory and any action taken to date, including details of any support provided and work observation records, will be provided in writing to the employee / volunteer before the meeting. Targets, standards, deadlines and further support will be identified and compiled into

a draft action plan. The draft action plan will be in writing and given to the employee / volunteer before the meeting.

At the meeting the employee / volunteer will be given the opportunity to provide any relevant evidence of matters that may affect performance and which may be unknown to the manager. The employee / volunteer will also have opportunity to comment on the action plan and will be invited to suggest further sources of support.

A review date will be set where progress will be measured against the action plan targets. The actual length of the review period will depend on what targets have been set. The manager should identify how progress against the action plan will be measured and what evidence will be used for review purposes.

The manager will prepare a note of the meeting and send a copy to the employee / volunteer, together with a copy of the finalised action plan.

If the employee / volunteer does not accept that her/his performance is unsatisfactory and/or if s/he disagrees with any of the manager's notes then the employee / volunteer may enter a note of dissent which will form part of the record.

Before the review meeting, the manager will consider all available evidence to determine whether sufficient progress has been made. The manager will write a report that provides an assessment of where targets have/have not been met and other supporting documentation, e.g. copies of observation reports, details of support provided. The report and supporting documentation will be sent to the employee / volunteer five working days before the review meeting.

At the meeting the employee / volunteer will have opportunity to provide details of any relevant matters that may be affecting performance and which may be unknown to the manager. The employee / volunteer will also have opportunity to comment on the report and will be invited to suggest further sources of support that may be required. The employee / volunteer is entitled to be accompanied by a trade union representative or friend. A Trustee will also be present to advise on procedural issues

The manager will prepare a note of the meeting including the assessment of where targets have/have not been met. A copy of the note will be sent to the employee together with a copy of any revised action plan.

If the employee / volunteer does not accept that her/his performance remains unsatisfactory, or if s/he disagrees with any of the manager's notes then the employee / volunteer may enter a note of dissent which will form part of the record.

Alternatively if the decision is to fail the probationary period the employee / volunteer may appeal in writing within 5 working days of receiving the manager's note of the Formal Meeting. The employee's / volunteers notice of appeal shall set out the grounds of that appeal and enclose any supporting documentation.

Appeal

An employee / volunteer may appeal against a decision to fail their probationary period. The employee must exercise the right to appeal within 10 working days of being notified of the outcome and must provide written grounds of appeal to the Board of Trustees.

The Appeal Panel will be heard by a Panel of three Trustees.

The employee / volunteer must be given at least 10 working days notice of the appeal hearing and advised of the entitlement to be represented by a trade union representative or a friend. The letter giving such notice should state the date, time and place of the appeal hearing, attach all relevant documentation, give the names of those hearing the appeal and any witnesses to be called in person.

All relevant documents, including the grounds of appeal and manager response, will be made available to the Appeal Panel in sufficient time to enable the Panel to read the evidence on both sides and prepare questions. Appeal Panel members must not discuss the case with anyone (apart from fellow Panel members) prior to the hearing.

A Board member will be present to advise the Panel on procedure.

The Panel should arrange for all persons present to introduce themselves and all witnesses as they are called. The purpose of the appeal hearing should be explained. The Chair will remind those present (and in turn the witnesses) that the proceedings are confidential.

Once all the evidence has been presented and all questions asked, the appeal hearing will be concluded, all parties except the Panel and any advisors will leave the room. The Appeal Panel must consider all the evidence presented to them and decide whether to confirm, modify or overturn the decision regarding the probationary period.

The outcome of the hearing must be confirmed in writing to the employee / volunteer within five working days.

The decision of the Appeal Panel is final. This does not affect an individual's statutory rights.

Section A policy 4 Staff / volunteer training and development Policy

POLICY

THE BIRCHALL TRUST encourages all staff to make a full contribution to the success of the organisation both in their current and future roles. To assist staff and volunteers the organisation will provide development opportunities so that they may gain new knowledge, develop new skills and build on their experience.

Scope

The policy applies to all staff and volunteers within the organisation. Staff / volunteer development includes any learning activity, undertaken by staff / volunteers, either as an individual or in a group; whether on site or off-site; whether through direct training or through self-directed reflective activities.

PROCEDURES

Identifying Need

Each individual member of staff or volunteer, through the supervision process, and other feedback processes e.g. feedback from students, service users etc... should seek to identify gaps in their knowledge, experience or competency which affects their ability to perform at a high standard in their role. They should also identify development needs in relation to their current role and how this may change and to future career aspirations and opportunities.

During the supervision, the individual and supervisor should identify appropriate development which meets the needs identified. The individual manager is also responsible for identifying individual and group development needs in the context of team objectives.

The line manager, will need to incorporate staff development requirements, both current and future needs, into the overall organisational framework.

The Manager and Trustees are also responsible for identifying national changes in legislation, policy and procedure which creates staff development needs across the Organisation.

Identifying Provision

Staff / volunteer development covers a wide range of tools and interventions. Staff development includes:

Group Supervision

Counsellors: THE BIRCHALL TRUST have monthly group supervision in place for volunteer counsellors and view this as an essential requirement for the team. Attendance at monthly group supervision is a mandatory requirement for all volunteer counsellors to engage in this work for The Birchall Trust.

Mentoring

A mentor is assigned to every student volunteer counsellor. This mentor can be contacted to share client issues and also clarification of policies and procedures. This can be a 5-10 minute telephone conversation depending on the needs of the volunteer. It should be stressed that this does not replace clinical supervision.

Ongoing training

THE BIRCHALL TRUST offer ongoing training (subject to available funds) for Counsellors.

Counsellors should also keep a record of their client hours, supervision, mentoring etc; which must be submitted each month-end on the appropriate Professional Practice Monthly Report (PPMR) form. They will also need to keep a log of any ongoing training that they undertake for inclusion in their portfolios.

Paid staff

- External training courses i.e. health and safety
- Formal qualification routes
- Self-directed learning, reading, DVD, web resources
- On-the-job training

THE BIRCHALL TRUST is responsible for providing and funding staff development which is specific to their area; where the activities of special interest and benefit to one person or a small number. Access to programmes will be in accordance with organisational plans and individual supervision outcomes.

Evaluation

All on going training is evaluated by participants to ensure that original objectives have been achieved. The entire in-house programme is evaluated annually to ensure that training and development activities are of appropriate quality and provide an effective use of resources.

Line managers should review development needs following training and other interventions to ensure that learning is integrated into working practice and the individual development plan for the employee / volunteer is updated.

Section A policy 5 Expenses policy and procedure

POLICY

This policy sets out the expenses that may be claimed by members of staff, volunteer counsellors and Board members of THE BIRCHALL TRUST. It is the organisations policy to reimburse Members for all necessary travel, accommodation and other expenses, incurred while they are engaged in authorised THE BIRCHALL TRUST business. This includes attendance on approved training courses.

The organisation will set levels of expenditure that are deemed appropriate and which may only be varied at the discretion of the Board of Trustees.

The level of reimbursement allowed will be sufficient to provide a standard and quality, which will adequately meet the needs of staff/volunteers/ board members from the viewpoint of comfort, safety and acceptability for the effective conduct of organisation business.

PROCEDURES

Travel to see clients or attendance at group supervision:

Private Vehicles:

Staff using private vehicles for organisation business can claim mileage rates as stated in current contracts.

Before any other expenses are incurred, travel or otherwise authorisation must be given in writing or e mail by the Manager of THE BIRCHALL TRUST.

Procedures for Claiming Mileage Expenses

In order to claim for expenses staff / volunteers or Trustees should ask for an expenses claim form from the main office and complete the details in line with this policy.

Claim forms need to be signed by an individual line manager with authority i.e. THE BIRCHALL TRUST manager.

It is important that expenses claims are submitted by the end of each month to ensure that they can be re-imbursed in the following month.

Reimbursement of expenses

Expenses are reimbursed, one month in arrears. Receipts, must support all expenses. Failure to provide receipts will result in the claim being rejected.

The immediate line manager must take up any grievance regarding a proposed expenditure or reimbursement in the first instance. If unresolved, the matter should be taken up through the organisations **Grievance procedure (Section A policy 11)**.

Section A policy 6 Management supervision policy and procedure

POLICY.

THE BIRCHALL TRUST believes that all staff have a right to regular, planned supervision. Supervision is a partnership between the supervisor, supervisee and the organisation. The delivery of and participation in supervision are priority tasks for managers and staff.

The provision of regular developmental supervision creates the opportunity to recognise the contribution that staff make to the organisation. The potential of each individual should be developed to a maximum. It is the responsibility of line managers to provide supervision and the right of staff to receive it.

Scope

This policy covers all managers who manage staff within the organisation and is intended to provide a framework within which supervision should take place within the organisation.

Definition

Supervision is a process in which one worker is given responsibility to work with another to meet certain organisational, professional and personal objectives, and is achieved primarily (but not exclusively) through meetings between supervisor and supervisee.

PROCEDURE

All supervisors within the scope of this policy are required to provide supervision for their staff. Because the policy provides for access to supervision at every level in the organisation, managers and supervisors will also be supervisees.

The main objectives of supervision are;

- To achieve competence in providing the highest quality service
- To ensure accountable performance
- To provide continuing professional development and personal support
- Value staff, support good practice and share knowledge and skills across the organisation
- Ensure staff can have a two way discussion with their supervisor about:
 - workload
 - its complexity
 - raise any related risks and issues

Promote:

- empowerment
- anti- discriminatory practise / valuing equality and diversity, within the supervisory process and with service users
- child protection practise and raise related issues and concerns
- continuous improvement of service provision and performance
- wellbeing and health and safety of all staff
- reflective practice

Supervision framework

Standards

- It is expected that minimum standards set down in the policy will be adhered to, including a written agreement, recording, structure frequency, preparation, equal opportunities processes.

Agreement

- The line manager and supervisee should together draw up a written agreement for supervision, as a means of making explicit authority, accountability, expectations, rights and responsibilities in working together towards agreed goals.

The negotiated agreement should include,

- Rights and responsibilities of both supervisor/supervisee (e.g. confidentially)
- Structure (e.g. Frequency, recording, agenda setting)
- Content (e.g. review work, agree action plan, give feedback)
- Process (e.g. Expectations of each other's contribution)

- The line manager should use the supervision agreement to establish an effective working relationship.

**Managers and Supervisors will:
For Supervision:**

- Establish and maintain suitable arrangements for supervision.
- Ensure the process is integrated into service planning and objective setting
- Set, monitor and review individual work objectives and targets and agree how these will be achieved
- Be competent in setting smart targets/objective, identifying personal development and interpersonal skill, knowledge and behaviours required to perform in a job role;
- Be knowledgeable regarding the supervisee and their job description and work issues;
- Support employees / volunteers subject to professional registration to fulfil the eligibility criteria and any requirements for continued registration;
- Ensure that written records pertaining to the supervisee are kept up to date and securely filed;
- Ensure preparation for any new and/or changing roles and responsibilities;
- If the supervisee's performance at work is affected by personal issues or vice versa, the supervisee should be offered support through their line manager

Recording

- Formal one-to-one supervision sessions will always be recorded on a 'Record of Supervision Form' and any outcome agreed, signed and dated by both parties.
- The records should be completed during the supervision discussion. They will be signed by both supervisor and supervisee and dated. A copy should be retained by the supervisor on the supervisee's personal file and a copy retained by the supervisee.
- Each supervisor will keep a 'Supervision File' of supervision records to be maintained throughout an employee's career. These must be kept in a secure place. These will remain the property of the organisation.
- Access to files will be restricted to the Supervisor, Supervisee, Senior Managers.
- Managers will keep an overall record of supervisions sessions planned and taken place, together with reasons why any planned sessions have not taken place and reschedule the date.
- Supervision files should include a copy of the individual job description, role profile, records of Induction.
- Where an employee changes jobs within the organisation or the supervisor changes, it is the responsibility of both staff member and the previous supervisor to ensure transfer of supervision records to the new supervisor.
- Where an individual leaves the department's employment the completed supervision file should be edited and combined with the Personnel files of the individual employee. Where it is legally required these files will be kept for future reference.
- Where an individual requires professional registration to practice it is the line manager's responsibility to check and record this on an annual basis.

Section A policy 7 Lone working policy and procedure

POLICY

THE BIRCHALL TRUST acknowledges its duty to make sufficient provision for the management of health and safety in the workplace. It is the policy of the organisation to fully implement the requirements of the Management of Health and Safety at Work Regulations 1999 by providing the facilities, procedures and resources to affect a suitable and sufficient health and safety management system.

THE BIRCHALL TRUST acknowledges its duty to make adequate provision for health and safety of lone workers. It is the policy of the organisation to fully implement the general requirements of the Health and Safety at Work Act 1974 and The Management of Health and Safety at Work Regulations 1999 in so far as lone working is concerned.

A key role in implementing this policy lies with line managers who must ensure staff are aware of, and implement the requirements of this policy.

Scope

These guidelines relate to all staff who are working alone within the organisation. The purpose of these procedures is to ensure that any risks associated with working in isolation are identified and action is taken to remove or reduce those risks.

PROCEDURE

Staff should bear in mind that although it is the legal responsibility of the organisation to provide safe systems of work, individuals have a responsibility to follow safe working practices. In situations where individuals work alone, or in small groups, they do need to remain alert to their own safety and that of their colleagues. To do this staff should:

- ensure they do not take unnecessary risks (See Guidelines attached);
- make their managers aware of any medical conditions that might have developed;
- seek and follow advice from their manager;
- follow all health and safety procedures;
- comply with requests for information on their whereabouts from managers;
- report any incidents including threats and potentially dangerous situations using the **Incident Reporting form**. These forms can be found in the main office.

Who are lone workers and what jobs do they do?

Lone workers are those who work by themselves without close or direct supervision. Within THE BIRCHALL TRUST this may include

People in fixed situations where:

- Only one person works on the premises;
- People work outside normal hours;
- People work separately from others.

Can people legally work alone?

Although there is no general legal prohibition on working alone, the broad duties of the Health and safety at work act still apply. Establishing safe working practices for lone workers is no different from organising the safety of other employees, except that lone workers do face particular problems. Some of the issues, which managers need to pay particular attention to, are as follows:

Can the risks of the job be adequately controlled by one person?

Lone workers should not be more at risk than other employees. This may require extra risk-control measures. Precautions should take account of normal work and foreseeable emergencies, e.g. fire, equipment failure, illness and accidents.

Managers should ask questions such as:

- Does the workplace present a special risk to the lone worker?
- Is there a safe entrance and exit?

- If equipment/plant is involved, can one person safely handle the work?
- If the work involves handling/lifting objects, is it too much for one person working alone?
- Are women especially at risk if they work alone?
- Are young workers especially at risk if they work alone?
- Are men especially at risk if they work alone?

What training is required to ensure competency in safety matters?

Training is especially important where there is limited supervision. Training may be critical to:

- Help avoid panic reactions in unusual situations;
- Ensure that lone workers are sufficiently experienced to understand any risks and precautions fully;
- That staff are competent to deal with new or unusual circumstances or where incidents occur that goes beyond the scope of the training. Under such circumstances staff should be instructed to stop work and seek advice from their supervisor/manager.

How will the person be supervised?

Although lone workers cannot be constantly supervised, it is still the manager's duty to ensure their health and safety at work. This could be done through:

- Regular contact between the lone worker and another member of staff by telephone;
- Checks that a lone worker has returned to their base or home on completion of their task.

What happens if a person becomes ill, has an accident or there is an emergency?

A risk assessment should identify foreseeable emergencies. The manager should then ensure that:

- Emergency procedures should be established and employees trained in them;
- Information about a dangerous situation/area should be given to lone workers;
- Staff should have access to first aid facilities;
- The risk assessment may indicate that lone workers need training in first aid;
- The risk assessment may also conclude that lone workers require other items of equipment such as torches, personal alarms or a mobile phone.

To look to minimise these risks Managers should:

- Ensure that local operational policies, systems and guidance are put in place to minimise general risk;
- To inform all staff and other involved parties of any potential risk;
- Ensure that staff/volunteers leave a daily or weekly programme giving their whereabouts and contact number with an appropriate member of the admin staff. Managers should also be able to access this information should the need arise;
- To support staff in the realistic assessment of risk;
- To take action to eliminate, minimise or transfer the risk;
- Ensure that in a difficult situation staff may be accompanied by another member of staff;
- To talk to employees and their safety representatives to ensure that all relevant hazards have been identified and appropriate controls chosen. (Consultation with employees and their representatives on health and safety matters is a legal duty);
- Control measures put in place by managers may include instruction, training, supervision, protective equipment etc.
- Managers should take steps to ensure that control measures are used and review the risk assessment from time to time to ensure that it is still adequate.

Staff guidelines

(these guidelines are not exhaustive but provide examples of the types of actions which contribute towards a safe working environment).

Before setting out:

- Before setting out be aware of the weather forecast and do not risk being caught up in bad weather conditions;

- Ensure that your vehicle has sufficient petrol and is well maintained;
- Allow yourself sufficient time for your journey so that you are not rushing;
- Make sure that you have all the equipment required for the work procedures that you are to carry out;
- Drive with client notes and equipment hidden so that you are not seen hiding them as you park;
- Maintain a weekly diary at base of all proposed visits;
- Ensure that colleagues can make contact with you if there are concerns. *(It is essential that if you change that programme you notify that colleague. A system must be in place whereby should a member of staff not arrive back within a reasonable time, and if they cannot be contacted, that their Manager is notified and the Police contacted if that is deemed the appropriate action);*
- Make sure that any personal safety alarms, mobile phones are in working order and that you have your base number (or other as is appropriate) set up so that it can be rung by pressing one button;
- Obtain as much information as possible about the client.
- If there is a know history of violence, threatened or actual, staff should discuss with their Manager whether they should see the client alone or whether they should visit with a colleague;
- **ALWAYS** inform other colleagues of possible dangers;
- Ensure that a friend, relative or colleague is aware of the diary/log book held at their base.

Once in a building

- Always follow the clients into a building;
- Maintain an escape route i.e. do not let the client get between you and the door;

If an incident occurs

- Put your own safety first. Leave a situation if you feel unsafe. Professional codes of conduct do not require you to jeopardise your own safety: it is better to leave and find an alternative way of providing care for the client;
- If the client is aggressive, but the aggression is not directed at you personally, allow them to “let off steam”, then calm them and help them to think of ways of resolving their problems;
- Do not be confrontational;
- Use a panic alarm only in situations where there is a clear escape route, and for surprise only;
- Call for assistance from the police or your team, as appropriate.
- **The organisation should ensure that local procedures/guidelines, appropriate to the nature of the workforce, are put in place for responding to incidents.**

After the incident has occurred

- Contact your manager and return to base;
- Allow yourself time to recover and if necessary seek practical support from colleagues; Even after minor incidents your feelings might be difficult to control. This is a perfectly natural reaction. If necessary – take time off;
- Contact the police if appropriate;
- Ask for debriefing and for further counselling if the post-trauma condition continues;
- Share information with others who might visit;
- Report the incident through the **incident and accident procedure**. Your manager may wish to investigate the incident further and may also wish to modify safety procedures for you and other staff in the future. It is also necessary to record any incident, so that you have a more secure basis for any legal redress relating to the incident.

**** Staff are reminded that any change in personal details e.g. address: telephone number must be reported to their Manager.**

Section A policy 8 Use of emails and other IT policy and procedure

Policy

THE BIRCHALL TRUST seeks to facilitate the proper and extensive use of IT in the interests of its work. This policy is intended to provide a framework for the responsible and legal use of email and internet and explains both general and specific monitoring which takes place to secure acceptable use of facilities.

Scope

All employees / volunteers using the Internet and e-mail at work must comply with the regulations.

Procedure

IT resources are provided to facilitate an employee's work. Use for other purposes, such as personal e-mail or recreational use of the World Wide Web, is allowed as a benefit to staff. Such access is not a right. Any use must not interfere with the employee's duties or any one else's use of facilities for work purposes and must not, in any way, bring the organisation into disrepute.

While the organisation routinely monitors the overall patterns of e-mail and Internet usage it does not, in the normal course of events, specifically identify the use made of the facilities by any individual employee. However, a record of log-ins is maintained and may be considered in an investigation. Under the Regulations of Investigatory Powers Act 2000, e-mail and Internet systems are subject to random monitoring and recording by or on behalf of the organisation. Accordingly, while the organisation will at all times seek to act in a fair manner, employees / volunteers should be aware that there can be no legitimate expectation of privacy when using the organisation's e-mail and Internet facilities.

Specific monitoring of the use of facilities both from examination of files held on the server and files held on an individual hard drive may be undertaken in investigating specific allegations of a breach of conduct under the organisations **disciplinary policy and procedures (Section A policy 10)**.

Definitions of Unacceptable Use

Unacceptable uses of the organisations computers and network resources are:

- the viewing, retention or distribution of material that is offensive, obscene or indecent, except in the course of recognised research or teaching that is permitted under UK and international law causing annoyance, inconvenience or needless anxiety to others.
- defamation
- intellectual property rights infringements
- unsolicited advertising ("spamming")
- attempts to break into or damage computer systems or data held thereon
- the distribution or storage of pirated software
- non work activities which generate heavy network traffic, especially those which interfere with others' legitimate use of computing facilities or incur a financial cost

Social Networking Websites

The only approved IT based methods of communicating with clients are telephone calls, sms (text) messaging and email. In all cases proper consideration should be given to client confidentiality before any action is taken. Employees, Volunteers and Freelance Counsellors must not use social networking websites for contacting clients for any purpose.

Other Investigations

Where specific allegations are received relating to the conduct of the employee the organisation reserves the right to check computer files held on backup files and on hard disks. In such cases the individual will be informed of the allegations and the nature and scope of the investigation being undertaken.

On rare occasions the police may request information regarding an individuals computer records. In such cases access to information will be governed by legal process.

Other Access Requirements or Restrictions

Individuals should not assume that the organisations system is secure. If employees / volunteers use Internet or email access to carry out on-line transactions the organisation takes no responsibility for any

part of the transaction and is not liable for any failure of security that might occur as a result of the transaction.

Employees / volunteers should not use another user's identification or allow another person to use her/his reference. Employees are responsible for the security of their own password and should they divulge the password to allow someone access under their own reference they will be accountable for the use of their account by the other person.

Section A policy 9

Alcohol, Drug and Substance Misuse policy and procedure

POLICY

THE BIRCHALL TRUST recognises its primary responsibilities to ensure a safe and healthy working environment for all staff. The organisation does not condone the excessive and/or inappropriate use of alcohol, or the misuse of drugs/substances, whether illicit or prescribed.

It recognises that a safe and healthy working environment is put at risk by employees who use alcohol and other drugs/substances in such a way that their health, work performance, conduct or relationships at work are adversely affected.

The organisation therefore encourages staff with alcohol and drug/substance related problems to seek help voluntarily and is committed to supporting the member of staff through this process in accordance with the Policy on Alcohol, Drug and Substance Misuse.

The policy, which applies equally to all members of staff, provides a fair and consistent system under which The Birchall Trust may refer for help those members of staff with alcohol and drug/substance related problems.

A member of staff who is undergoing treatment in accordance with this policy shall suffer no detriment in the application of promotion or any other procedure.

Definition

Alcohol, drug and substance misuse is defined as "the intermittent or continual use of alcohol or any drug or other substance which causes detriment to the member of staff's health, functioning, or performance at work, and which affects efficiency, productivity, safety, attendance, time keeping or conduct in the workplace".

Aims of the Policy

The aims of the policy are:

- to reduce the incidence of alcohol and drugs/substance related work impairment;
- to create a climate which encourages the member of staff not to conceal or deny alcohol and drug/substance related problems but to seek appropriate help;
- offer staff, who are known to have alcohol or drug/substance related problems affecting their work, referral to an appropriate agency for guidance and, if necessary, treatment;
- whenever possible, to secure the complete rehabilitation of staff with alcohol or drug/substance related problems and their return to an acceptable level of performance at work;
- to reduce the likelihood of disciplinary action resulting from alcohol or drug/substance misuse.

PROCEDURE

THE BIRCHALL TRUST will offer encouragement and assistance to members of staff who suspect or know that they have an alcohol or drug/substance related problem to seek help voluntarily at an early stage from an appropriate agency or via the established procedures.

Any member of staff who appears to be incapable of working effectively or safely apparently due to alcohol and/or substance misuse, will be interviewed by his/her Manager and, if appropriate, sent home pending further investigation. Any suspension from duty will be on full pay and details relating to the suspension will subsequently be confirmed in writing.

If through the course of an investigatory meeting or disciplinary proceedings, alcohol or drug/substance related problems are identified, the member of staff will immediately be given the opportunity to seek assessment and treatment as necessary from appropriate agencies via external agencies.

Roles and Responsibilities

The Individual

It is the responsibility of each individual member of staff to ensure that they are in a fit state to work. All staff are responsible for timely attendance at their work and for ensuring that their perception and performance of duties are unimpaired by alcohol or drugs.

The organisation does not exercise a ban on the consumption of alcohol in a social situation during the working day (e.g. lunchtime events, exhibitions etc). However, members of staff are expected to exercise appropriate self-control over their alcohol consumption to ensure that their work performance or behaviour is not impaired or adversely affected.

Cultural sensitivities and the good reputation of the organisation should also be considered in these circumstances.

If a member of staff does feel that they might have a problem with alcohol or drugs, they should try and seek help voluntarily and as soon as they can. Their first point of contact may be with their own GP, a specialist/help organisation.

Alternatively contact can be made with the member of staff's line manager. Enquires will be kept confidential but reference may need to be made to other agencies with specialist expertise. This will not be done without the individual's consent.

The Manager

The Manager has a direct responsibility for all staff including any member of staff who appears to have an alcohol or drugs/substance misuse problem.

If the Manager is concerned about a member of staff and believes that they have a drugs/substance misuse problem, they should raise this directly with the member of staff, highlighting aspects of performance or behaviour giving rise to the concern and encouraging the member of staff to talk freely about any problems.

If an alcohol or drugs/substance related problem is acknowledged or suspected, an appropriate referral should be made to a specialist agency.

It is recognised that other members of staff and clients may be affected by a colleague's alcohol or drugs/substance related problem, and that during the treatment of a member of staff, the Manager involved does also need to take reasonable steps to safeguard their interests and to identify and assess risks within their area of responsibility.

Confidentiality

The identity and records of members of staff known to have alcohol or drug related problems will be kept in the strictest of confidence except, in exceptional circumstances, where there is judged to be an unacceptable risk to the individual, other people or to the organisation itself.

It may be necessary as described above to involve other professionals involved in the case in the discussion about how the member of staff can be enabled to remain at work whilst support, treatment etc are ongoing. In these circumstances the individual will be consulted and supported and encouraged to discuss issues with relevant people.

Section A Policy 10 Disciplinary policy and procedure

POLICY

In order for THE BIRCHALL TRUST to fulfill its organisational aims it is important that satisfactory standards of conduct are maintained. The disciplinary procedure clarifies the rights and responsibilities of both the employer / placement provider and employee / volunteers in order to achieve fairness and consistency of treatment

No formal disciplinary action will be taken against any employee without a full investigation of the facts.

PROCEDURE

In order to ensure that you are treated fairly if your conduct or performance does not meet the standards required by the company will adopt the following procedure:

Informal warning

If an employee / volunteer fails to meet the standards required by the organisation they will initially be given an informal warning by their line manager. This will not be recorded on their personnel records.

First written warning

If the employee's / volunteers conduct or performance fails to improve they will attend a disciplinary hearing at which they may be accompanied or represented by a colleague or by a trade union official.

If the outcome of the meeting is a first written warning this will be kept on record for six months and disregarded for disciplinary purposes after that period.

Final written warning

If the employee's / volunteers offence is sufficiently serious, or there is a failure to improve within six months of the first written warning they will receive a final written warning.

The employee / volunteer will attend a disciplinary hearing at which they may be accompanied or represented by a colleague or by a trade union official.

If the outcome of the meeting is a final written warning this will be kept on record for six months and disregarded for disciplinary purposes after that period.

Gross misconduct

If an employee / volunteer commits an extremely serious disciplinary offence the organisation may dismiss them with out prior warnings and without notice.

Some examples of offences which constitute gross misconduct are:

Dishonesty, theft or fraud - malicious damage - fighting, assault on another person - serious incapability through alcohol or illegal drugs - actions which endanger employees' safety - falsification or unauthorised removal of company records or property - a serious act of insubordination.

(This list is not exhaustive)

If the employee / volunteer is alleged to have carried out such an act of gross misconduct the organisation will suspend them on full pay whilst it carries out an investigation into the alleged offence.

At the disciplinary hearing the employee / volunteer will be given the opportunity to state their case and be represented or accompanied by a colleague of their choice or by a trade union official.

If, after investigation, it is confirmed that an employee / volunteer has committed an act of gross misconduct the normal consequence will be dismissal without notice or payment in lieu of notice.

Three step statutory discipline and dismissal procedure

If an employee / volunteer faces dismissal or action short of dismissal such as loss of pay, demotion or suspension without pay the three step statutory disciplinary and dismissal procedure will apply. This involves:

- **step one:** a written note to the employee setting out the allegation and the basis for it
- **step two:** a meeting to consider and discuss the allegation
- **step three:** a right of appeal including an appeal meeting.

The employee / volunteer will be reminded of their right to be accompanied.

Appeals

An employee / volunteer who wishes to appeal against any disciplinary decision must appeal to their line manager within five working days. The chairperson will hear the appeal and decide the case as impartially as possible.

Section A policy 11 Staff Grievance Policy and procedure

POLICY

THE BIRCHALL TRUST makes every effort to provide a working environment in which complaints and problems are resolved quickly and fairly. Any employee or volunteer is entitled to the benefit of the following procedure if they feel they have a problem with any aspect of their employment or placement.

PROCEDURE

The aim of a grievance procedure is to enable any member(s) of staff or volunteers to have her/his grievance heard and to seek a redress as appropriate. The intention is that grievances should be settled quickly and fairly and should be dealt with as close to their source as possible.

Scope

The procedure applies to all staff and volunteer counselors employed by THE BIRCHALL TRUST

Any complaint against a named employee, which involves an alleged breach of the Disciplinary Rules, will be investigated under the **discipline procedures (Section A policy 10)**.

Stage 1: Informal Procedure

Where a member of staff or volunteer has a grievance relating to their employment or placement they should where appropriate try to resolve the matter by direct approach with the person(s) concerned.

If a direct approach is considered inappropriate or where the matter is not resolved as a result of such an approach, the employee should raise the grievance with her/his line manager and should inform the person(s) against whom s/he has a grievance that s/he proposes to discuss the matter with the manager.

Where the grievance relates to the direct line manager the person should refer the matter to the next level of management within THE BIRCHALL TRUST i.e. chair of the board of trustees

An interview with the manager (or chair of the board of trustees) should be granted as soon as possible and usually within five working days.

Whilst it is not anticipated that trade union representatives or friends will attend meetings at this stage, employees are advised to seek support and advice from their representatives as appropriate.

Stage 2: Formal Hearing

Where the grievance has not been resolved to the employee's or volunteers satisfaction under the informal procedures, or the employee / volunteer feels unable to pursue their grievance as an informal matter, the employee / volunteer should submit formal written notice of the grievance to the next level of management together with any relevant documents.

If the grievance involves another member of staff / volunteer copies should be sent to them also.

Where issues relate to matters of harassment or bullying then the **Harassment Procedure (Section A policy 12)** should be followed.

The Manager should seek to resolve the grievance and should:

- a) Arrange to meet the employee / volunteer within 10 working days of receipt of the written grievance. The employee / volunteer is entitled to be represented by a trade union representative or friend. A Trustee will also be present.
- b) Explore with the member of staff the nature of the grievance and any action s/he wishes to be taken to resolve it.
- c) Obtain and consider thoroughly all the relevant facts. Further investigation may take place.
- d) Determine whether the grievance is justified and, if so, what action can be taken/recommended to resolve it.

- e) Notify the employee / volunteer in writing of the outcome as soon as possible informing her/him:
- f) Whether the grievance is justified and if so what action is to be taken or recommended to resolve it; or
- g) If the grievance is considered not justified the reasons for arriving at this conclusion should be fully explained.
- h) A response should be made within 10 working days. In exceptional cases it may be impossible to respond in this time-scale and the employee / volunteer should be notified of the reasons for delay and the date that they will receive a response.
- i) Inform the employee in writing of her/his right of appeal of the findings and recommendations.

Stage 3: Appeal

If the employee / volunteer is dissatisfied with the outcome and the matter is still not resolved s/he may seek a review of the case by a trustee of the organisation who has had no previous involvement in the case.

The employee / volunteer should write to the Board of Trustees requesting a review and making clear the nature of their grievance and continued dissatisfaction.

The employee / volunteer will be given 10 working days notice of the appeal meeting and be entitled to be represented by a trade union representative or friend.

The Manager who heard the grievance should prepare a report which details actions taken to date in response to the grievance, including all supporting documentation.

The report should be provided to the employee at least 10 working days before the meeting and the employee given the opportunity to submit a written response which should be sent to the Board of Trustees five working days before the hearing. A member of the Board will be present to provide procedural advice.

The Trustee will respond in writing to the employee and the manager who heard the grievance within five working days.

There is no further right of appeal. This does not affect an individual employee's right to pursue matters within the Employment Tribunal nor requirements to follow statutory grievance procedures in cases where employees wish to raise grievances within short notice periods or post employment.

Section A policy 12 Harassment policy and Procedures

POLICY

THE BIRCHALL TRUST is committed to equality and will not tolerate bullying nor harassment of one member of the organisation. There are many forms of harassment and bullying which can be described in simple terms as unwelcome behaviour that affects the dignity of women and men. It is the conduct of one person against another or others when an intimidating, hostile or offensive atmosphere is created for the complainant(s). Harassment takes many forms and includes behaviour related to gender, ethnicity, colour, disability, religion, nationality, age, occupation, marital status, sexual orientation or other personal characteristics.

Staff, volunteers and service users should be confident that the THE BIRCHALL TRUST takes these issues very seriously. If a member of staff, volunteer counsellor or service user believes that they are being harassed or bullied by another student or member of staff the Board of trustees will support them in taking a case forward and will deal with any behaviour that is found to be unacceptable.

PROCEDURE

Where an individual believes they are being harassed and/or bullied and this situation has not been resolved by informal means they should follow the following procedure:

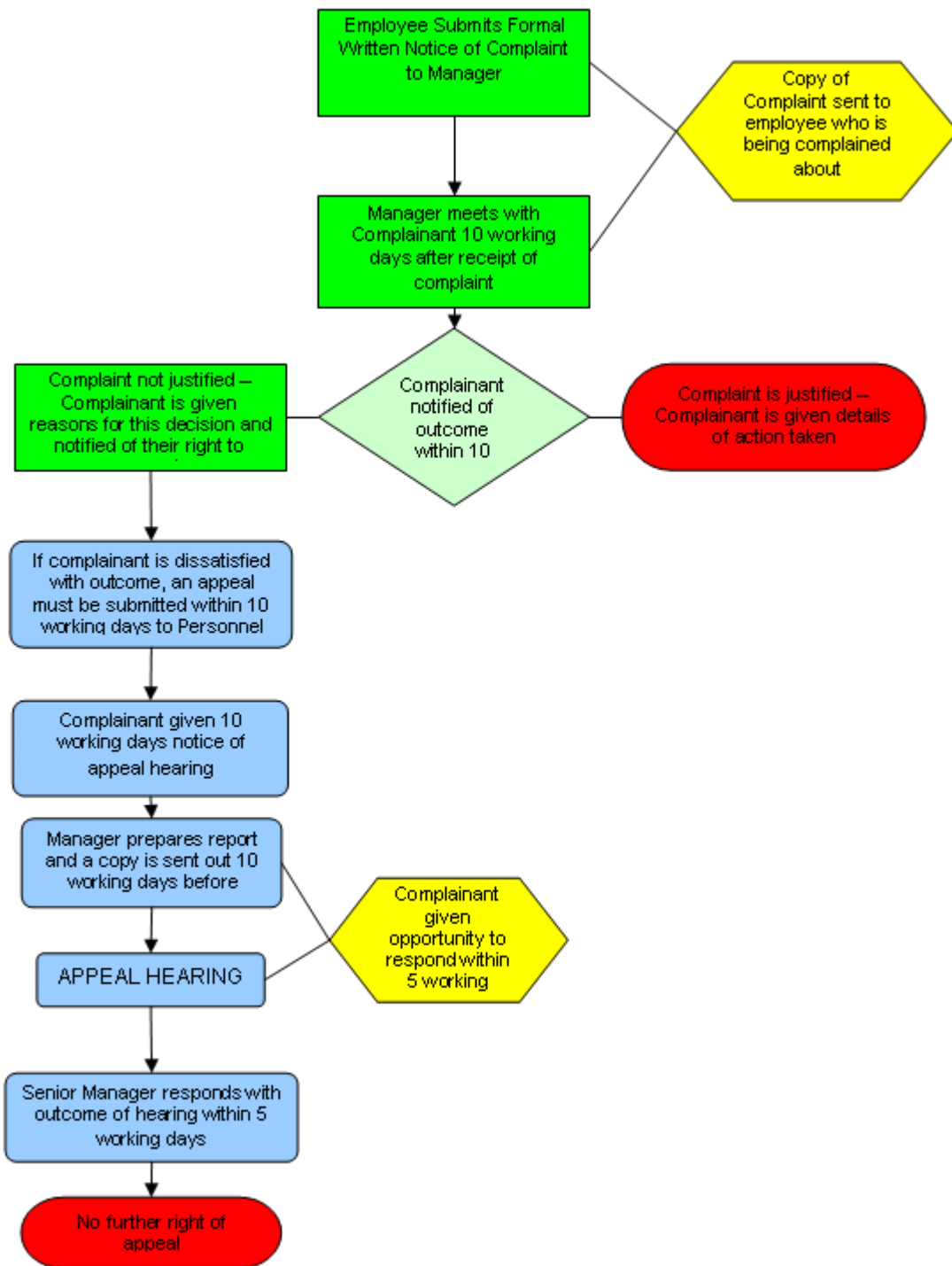
- Where the complaint has not been resolved through informal approaches, or the employee/volunteer/client feels unable to pursue their complaint as an informal matter, they should submit formal written notice of the complaint to the manager of the service.
- A copy of the complaint should be sent to the person(s) complained about.

The Manager should seek to resolve the complaint and should:

- Arrange to meet the employee/volunteer/client within 10 working days of receipt of the written complaint. The employee/volunteer/client is entitled to be represented by a trade union representative or friend.
- Explore with the member of staff/volunteer/client the nature of the complaint and any action s/he wishes to be taken to resolve it.
- Obtain and consider thoroughly all the relevant facts through wider investigation which may include interviewing or receiving written comments from the alleged perpetrator and other witnesses.
- Determine whether the complaint is justified and, if so, what action can be taken / recommended to resolve it.
- Notify the employee/volunteer/client in writing of the outcome as soon as possible informing her/him:
 - o Whether the complaint is justified and if so what action is to be taken or recommended to resolve it; or
 - o If the complaint is considered not justified, the reasons for arriving at this conclusion should be fully explained.
- A response should be made within 10 working days. In exceptional cases, or where further detailed investigation is required, it may be impossible to respond in this time-scale and the employee/volunteer/client should be notified of the reasons for delay and the date that they will receive a response.
- Inform the employee/volunteer/client in writing of her/his right of appeal of the findings and recommendations

- If the employee/volunteer/client is dissatisfied with the outcome and the matter is still not resolved s/he may appeal to a member of the Board of Trustees who has had no previous involvement in the case. If the employee/volunteer/client wishes to appeal s/he must exercise this right within 10 working days of being notified of the outcome of the complaint and must provide written grounds of appeal to personnel.
- The appeal meeting will be arranged as soon as practicable. The employee/volunteer/client must be given at least 10 working days notice of the appeal meeting and advised of their entitlement to be represented by a trade union representative or friend.
- The Manager who heard the complaint should prepare a report which details actions taken to date in response to the complaint, including all supporting documentation.
- The report should be provided to the employee/volunteer/client at least 10 working days before the meeting and the employee given the opportunity to submit a written response which should be sent to the Board of Trustees five working days before the hearing. A Board member will be present to provide procedural advice.
- The Board Member will respond in writing to the employee and the manager who heard the complaint within five working days.
- There is no further right of appeal. This does not affect an individuals statutory rights.

Harassment Procedure Process:



Section A policy 13
Management of Sickness Absence Procedures

Statutory Sick Pay

Employees who are absent from work because of sickness will normally be entitled to receive Statutory Sick Pay (SSP) from the Charity providing they meet the relevant criteria.

Once the criteria have been met, SSP is not normally payable for the first three days of sickness absence, unless the employee has been absent and in receipt of SSP within the previous eight weeks. Thereafter the Charity will normally pay SSP at the statutory rate in force for a maximum of 28 weeks.

In order to qualify for SSP the employee must notify the Charity on the first qualifying day, and submit an absence form as soon as practicable. The Charity reserves the right to withhold payment of SSP where an employee fails to follow the correct procedure.

Certain employees are excluded from the SSP scheme, e.g., employees who earn below the lower earnings limit for National Insurance purposes.

The provisions relating to SSP are extremely complex. Employees who have any questions about it should approach the Manager.

The Birchall Trust Sick Pay:

The following provisions set out employees' entitlement to contractual sick pay, which applies only after completion of 12 months service. Payment of contractual sick pay is inclusive of any SSP entitlement i.e. employees are not entitled to both.

Recording of sickness will be based on the pattern of hours in your normal working week. This is subject to the following caveats:

a) If staff members are sick on one of their normal working days, they may choose to rearrange their work pattern to make up their hours during the month concerned.

b) Sickness that occurs on days not normally worked or holidays, cannot be counted as sick leave.

The following provisions set out employees' sick pay entitlement

Years of Service

Full Pay

More than 12 months & up to two years' service

Total of 5 days per year

Two years to five years service

Total of 10 days per year

After five years service

Total of 20 days per year

Please note full pay by definition means the employees current normal salary. For part time staff, days are on a pro-rata basis.

Payment of Charity sick pay will not be made unless the Charity procedures relating to the notification and absence form have been fully complied with.

The calculation of Charity sick pay will take into account any previous payments of Charity sick pay made in the 12 months immediately prior to the first day of the current sickness absence.

The service length qualification will be calculated in respect of the employee's service length on the first day of the absence.

Charity sick pay will not be paid where the sickness is self-induced, where the sickness or injury arises from misconduct at work.

Any Social Security benefits which employees are entitled to should be claimed. All payments received must be notified to the Charity & will be deducted from Charity sick pay entitlement.

Section B Policy 1 Access policy and procedure

POLICY

THE BIRCHALL TRUST is committed to providing an environment that is acceptable and accessible to all clients and that enables all clients to be treated with dignity and respect. Services should be available to all individuals who need our support.

PROCEDURE

Contacting the Service

Contact can be made in person at advertised times, by telephone, email, text phone or in writing..

Written information

- Leaflets and written information can be provided in alternative formats such as large print, Braille, tape, CD/disk or coloured paper on request. Staff will take account of individual access requirements in routine correspondence.
- We strive to ensure that our written information complies with plain English standards and is appropriate for students with dyslexia or other specific learning difficulties.

Alternative appointments

If a client is genuinely unable to attend the service in person, appointments and consultation may be offered by telephone, email or in writing, if appropriate. Every effort will be made to provide the same level of service.

Promotion and Publicity

We distribute advertising materials for display in a range of public buildings but with particular emphasis on doctor's surgeries and health and community centres.

Monitoring, Evaluation and Feedback

We run anonymous client evaluation processes for our service provision throughout the year. This allows us to gain feedback on our service provision, monitor standards and reflect on areas for improvement or development.

Withdrawal or refusal of service

In certain circumstances, access to our services may be limited or refused. **See our Withdrawal and Refusal of Service Policy and Procedure (Section B policy 8)**, available from the main office.

Staff

- We consider local recruitment wherever possible in order to obtain a staff composition representative of the area that the organisation is in.
- We are keen for our staff to participate in any training provided by the organisation on equal opportunities.

Consistency of Service Provision

All specialist staff participate in regular supervision activities to monitor:

- quality
- good practice and compliance with professional ethical standards
- ethics and conflict of interest

Counsellors engage in regular external clinical supervision in line with requirements of the British Association for Counselling & Psychotherapy, and have regular case discussion meetings to monitor and assess clinical work.

The Manager and administrator monitor and review frontline service provision on an ongoing basis.

Environment

- We strive to provide an environment that is accessible and acceptable to a diverse range of students by remaining aware of difference regarding ethnicity, culture, race, nationality, religion, sexual orientation, age, disability and gender.
- We embrace the organisation's **Equal Opportunities Policy (Section C policy 2) and Harassment policy (Section A policy 12)** and strive to provide a confidential and non-judgemental environment that enables all clients to be treated with dignity and respect.
- Our waiting areas and consulting rooms are arranged to take account of clients with mobility and sensory disabilities.
- We are responsive to the needs of clients with physical or mental disabilities and will make reasonable adjustments necessary to provide an environment appropriate to individual needs.

Complaints

Complaints are dealt with under our **Complaints Policy (Section B policy 3)**, available from our main office

Awareness and policy review

All Student Counselling Service staff receive training on this policy during their induction.

Clients are made aware of this policy via:

- Copies available from main office on request

Section B policy 2
Child protection policy and procedure

The Birchall Trust

Charity registration no. 1109637 company no. 5424196

Safeguarding Children Policy

Introduction to The Birchall Trust

The Birchall Trust (THE BIRCHALL TRUST) has been serving the community since 1991 in South Cumbria, Barrow-in-Furness and surrounding rural districts, developing professional therapeutic services for male and female survivors of rape, sexual abuse, and incest. THE BIRCHALL TRUST receives referrals from other agencies, statutory bodies and self referrals. The services range from personal counselling, group therapy, informal drop in, practical workshops and children's therapeutic services.

The team of therapist consists of qualified volunteers for the adult services and for the children's services we employ a bank of qualified child therapists. As members all therapists must adhere to THE BIRCHALL TRUST policy and professional guidelines. On completion of THE BIRCHALL TRUST in house training and selection process, successful applicants are police checked before induction to the service. Each volunteer member is assigned a personal mentor and is required to attend monthly group support. All therapists both volunteer and child therapists must work to high professional standard and receive monthly clinical supervision. All therapists are required to submit a monthly record for THE BIRCHALL TRUST files with supervisor's signatures of clinical supervision, client hours, mentoring and group support attendance.

Definition of Children's Services

THE BIRCHALL TRUST offer therapy to children from 3 years of age upwards, with a qualified child therapist. The Birchall Trust operate a confidential service however a **child's safety is paramount and child protection supersedes THE BIRCHALL TRUST policy regards confidentiality.**

The children's therapeutic services are available to children from the age of 3 years upwards. THE BIRCHALL TRUST child/family services is a privileged and confidential process in which a qualified Child/Family Therapist will be allocated a referral via the THE BIRCHALL TRUST designated Child Protection Coordinator.

All referrals received for children under the age of 12 must have been **reported** to the appropriate statutory bodies i.e. police and social services. A conviction, trial or care proceedings are not essential criteria to qualify for therapy, however our agency will need evidence that the sexual abuse incident has been reported at some stage to the aforementioned authorities.

If a teenager has the maturity and understanding to decide no to make a report, we will respect that decision and they can access the service. (Gillick Competence and Fraser Guidelines 1985)

Therapy can proceed following confirmation of the essential Child Protection Investigations. In the event of criminal procedures, therapy may be initiated subject to the Crown Prosecution Service and/or the designated care Judge's directive.

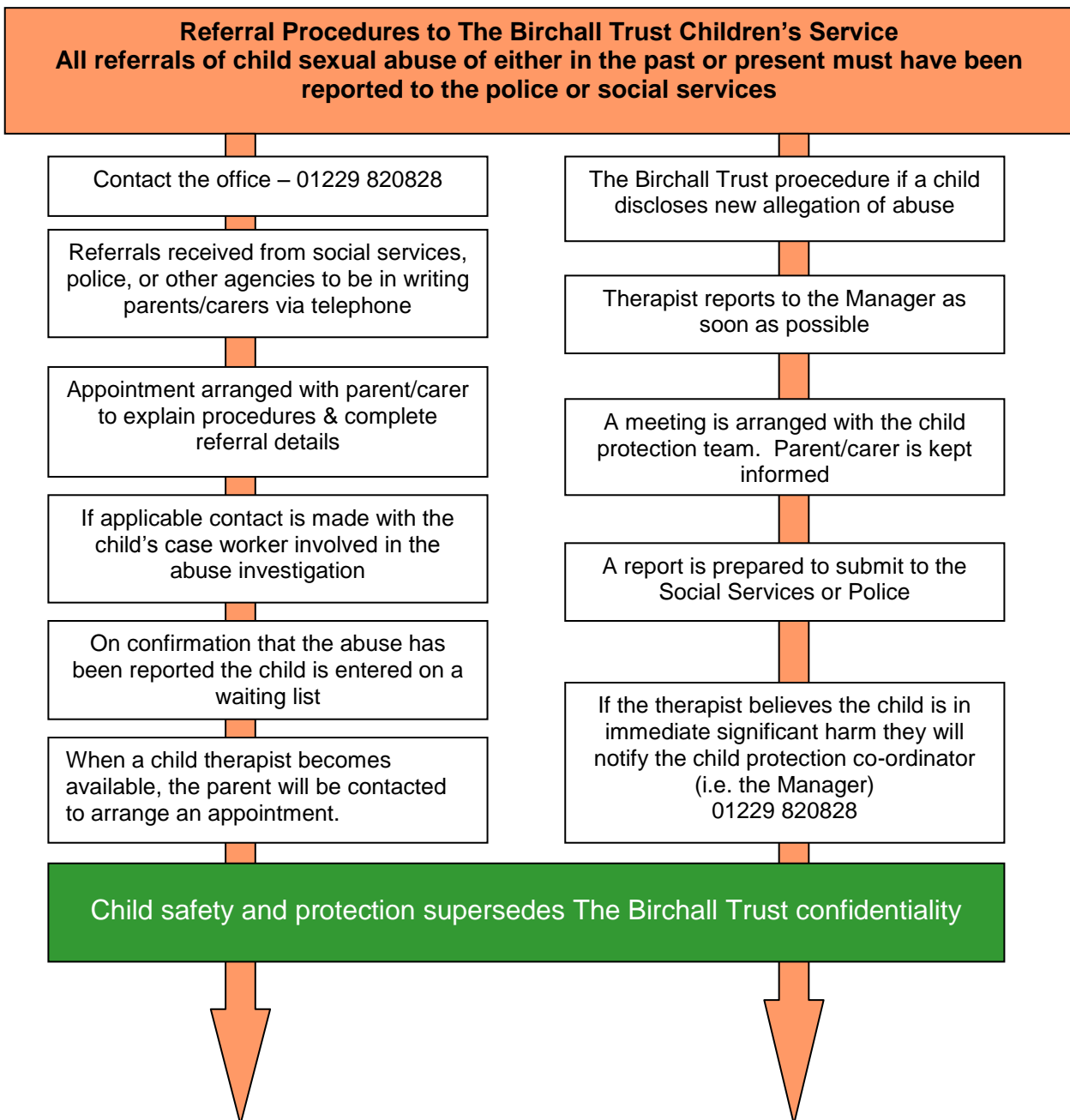
Referral procedures for Child Therapy with THE BIRCHALL TRUST

All referrals for child therapy to THE BIRCHALL TRUST must present evidence that the sexual abuse has been reported to the appropriate statutory agency i.e. police and social services either at some time in the past or present. A conviction or trial is not the essential criteria to qualify for therapy however the child sexual abuse has to have been investigated to some degree. The designated THE BIRCHALL TRUST Child Protection Coordinator will arrange to interview the parent/carer of the child. A referral and

monitoring form is to be completed by the person initiating the referral; this could be the social worker or the parent/carer. If the parent is making the referral the Child Protection Co-ordinator (CPC) will need a contact name and telephone number of the social worker or police involved in the report/investigations of sexual abuse of the child in question.

When the referral is made by a social worker or the police, CPC will keep the person in charge of the case updated of the agencies progress of the referral. Any child cases that are not current with the social services and no longer under investigation will not need to be updated with the social worker or police however confirmation of past investigations will need to be verified for THE BIRCHALL TRUST records.

Upon acceptance of the child referral, a responsible adult must accompany the child to therapy and remain on the premises until the allocated therapist returns the child following therapy to the responsible adult.



Suspicion/Allegation of Further Abuse Disclosed during therapy

Should a new allegation or suspicion of sexual abuse arise which is additional to or different from those outlined in the written document from Social Services, this will be treated and reported as a new child protection issue. This applies if the new allegation is in relation to the child currently in therapy or in relation to extended family or social circle. It is not the remit of THE BIRCHALL TRUST to investigate new allegations but we are required to report the new allegations to the appropriate statutory agency or the Social Services identified key worker noted on referral. It is the Social Worker's statutory obligation to investigate new allegations under section 47, reporting responsibility also applies to the guardian and/or solicitor if appropriate.

Reporting Procedures

The Child/Family Therapist is required to report any suspicion or disclosure of new allegations of sexual abuse to the designated THE BIRCHALL TRUST Child Protection Coordinator as soon as possible with the child's protection as paramount. If the therapist views that the child is in immediate significant harm it is their professional obligation to make a referral. The THE BIRCHALL TRUST Child Protection Coordinator will call an immediate meeting. Those in attendance will be:

- THE BIRCHALL TRUST Child Protection Coordinator
- Designated THE BIRCHALL TRUST Trustee (Child Protection Coordinator Monitor)
- The Therapist may be invited to attend to report details of disclosure

A report will be prepared, the therapist will be notified of action to be taken and the report will be submitted to the agreed identified key worker at the Social Services.

THE BIRCHALL TRUST Child Protection Coordinator for the whole service is the Manager based as the Barrow office 01229 820828

Confidentiality

The **protection of children overrides the principles of THE BIRCHALL TRUST confidentiality and parental decision making**. It is therefore the responsibility for the THE BIRCHALL TRUST Child Protection Coordinator in the first meeting with the participants, to explain the procedure and ask that the participants sign the form 'Information for parents/carers regarding confidentiality and the child protection policy and complaints procedure.

Recruitment Procedure - staff working with THE BIRCHALL TRUST Children's Therapeutic Services

All staff that are entrusted to work with children and their families will be subject to checks and supervision/monitoring and training requirements:

- Application, interview, employment history checks, taking up references, criminal record investigation.
- Induction and training programme including code of behaviour
- Monthly supervision – individual cases will determine supervision needs and this will be negotiated.
- Mandatory case team meetings
- Commitment to training and development. Training needs will be identified from ongoing supervision and staff will be constantly updated with issues that arise from the work with the children's service
- Adherence to our policies and procedures regarding child protection, health and safety, complaints procedures, information for parents/carers, reporting procedures in the event of further allegation or suspicions of abuse.

Section B Policy 3 Complaints Policy and procedure

POLICY

THE BIRCHALL TRUST aims to provide a high quality professional service to all clients. If you are unhappy with any aspect of our service please tell us. This allows us to deal with your case properly and helps us to identify where we might need to make changes or improvements.

PROCEDURE

Who can use this policy to complain about the Counselling Service?

Any client who is eligible to use our services - see our **Access Policy (Section B policy 1)** for more information ask for a copy at our main office.

What can I complain about?

- any aspect of the services we deliver
- how we deliver them

Where can I find more information about what I can expect from the Counselling Service?

- See our **Access Policy (Section B policy 1)**. This explains how we ensure that our services are acceptable and accessible to all our clients. You can get a copy from our main office
- See our **Withdrawal and Refusal of Service policy and procedures (Section B policy 8)**. This explains the limited circumstances when we might have to consider limiting the services we offer you.

How do I complain?

Step 1 – Informal resolution

General complaints about the Service

If you feel able to, speak to our reception staff in the first instance. They may be able to help you or advise you who else you should speak to. Alternatively, you can raise your concerns by email to: birchall.trust@hotmail.co.uk

Complaints concerning staff

If you feel able to, speak to the staff member that you have been dealing with. You might be able to resolve your concerns quite easily. If it isn't practical to speak to them in person, or you don't feel able to, consider writing to them or using email. You can email staff through our general email address at: birchall.trust@hotmail.co.uk or a letter at the main office.

Step 2 – Formal Complaint

Your formal complaint must be in writing to the Manager of the Counselling Service. You can email birchall.trust@hotmail.co.uk or send your letter to:

THE BIRCHALL TRUST Manager
60, Hartington Street
Barrow-in-Furness,
Cumbria LA14 5SR

What should my formal complaint include?

- Your name, address, and any other contact details that might be helpful
- A clear and concise explanation of what you found unsatisfactory and why you feel that it is unacceptable
- Any relevant dates or names of people involved

- If you can, an explanation of how you feel your situation could be resolved to your satisfaction
- Your signature and the date

How will my complaint be investigated?

The Manager will investigate the facts of your complaint and speak to any staff members concerned.

You will receive a written response, normally within two weeks. The written response will include details of how to take your complaint further if you are not satisfied with the outcome (see Step 3 below).

If your complaint is about the Manager, you may prefer to move straight to Step 3 after Step 1 (see below).

What records are kept?

The Manager will keep a record of the details of your complaint, any action taken and copies of all correspondence.

Your complaint will be kept confidential to the Counselling Service unless you choose to progress to step 3 of this procedure.

Data on formal complaints under this policy will be published in the Counselling Service annual report. All data will be anonymous.

Step 3 – Formal Complaint to the Board of Trustees

If you are not satisfied with the response from the Manager, you may complain to the Board of Trustees

Awareness and policy review

All Counselling Service staff receive training on this policy during their induction.

Regular team meetings ensure that awareness of this policy is maintained, and enable discussion on improvements and development

Clients are made aware of this policy via:

- Copies available from main office on request

Section B policy 4 Confidentiality policy and procedure

POLICY

THE BIRCHALL TRUST works within a strict code of confidentiality so that any information about individuals is kept confidential to the Service. The fact that clients have attended appointments at the Counselling Service, and anything discussed during appointments, will not be passed to anyone outside the Service without permission. In some rare situations we may need to break confidentiality even when we are unable to get permission to do so. These are when:-

- We would be liable to civil or criminal court proceedings if the information was not disclosed
- We believe that an individual is in serious danger

In these situations, we will always attempt to contact the client first to get permission to pass on the information, or talk to the client about passing the information themselves. If this is not possible, we may pass on the information ourselves, but only in the very rare and limited circumstances listed above.

PROCEDURE

Liaison and correspondence

If a client has agreed to us communicating with someone outside the Service about them, we will agree with them what information can be discussed. If we are writing to someone outside the Service on their behalf, we will offer them the chance to approve the letter before it is sent. Sometimes, we will ask clients to complete a disclosure authorisation form if we are dealing with an external agency on their behalf.

Record Keeping and Data Protection

It is essential for us to keep details about clients and their sessions with us. We do not store their details on computerised databases. Our manual records include name, address, age, gender, course details, number of appointments attended etc. This information is made anonymous before being used for statistical reports and service development issues. We also keep confidential case notes documenting the appointments of everyone who uses the Service. These paper files record details such as:-

Counselling Service:

- background information
- dates of appointments
- issues raised and worked on in sessions
- points of concern and action taken
- copies of relevant correspondence

Access to notes

Under the Data Protection Act, clients have a right to see the notes that we keep about them. If the notes containing references to other people; this information will not be available to the client, as protection is also granted to third parties.

When we show client notes, we will talk to the client about what is in the file and why. Some notes are in shorthand and may need explaining. Changes to notes cannot normally be made.

If a client wants to see their file, they must ask the counsellor they usually see. Clients must give two week's notice if they want to see their file.

Security

All notes and records are kept securely locked within the Service. These can only be accessed by staff employed within THE BIRCHALL TRUST.

Because they may contain sensitive personal information, counselling notes are filed anonymously and contain no reference to client's names.

In line with legal requirements Counselling Service, client's notes are maintained for 5 years. After this time they are destroyed by shredding.

Codes of ethics

Counsellors comply with the British Association for Counselling and Psychotherapy Code of Ethics and Practice. Copies of this are available from the Service.

Complaints

If clients feel unhappy about the way in which the Service has managed issues regarding confidentiality and data protection they can register these using the **Complaints Procedure (Section B policy 3)**, a copy of which is available from our main office.

Section B policy 5

Confidentiality Statement for clients - what you need to know

We consider confidentiality to be very important in counselling. We believe that this forms a foundation for trust to build between you and your counsellor, and that this is essential for you to feel safe when talking about very private and sensitive issues. It is, of course, absolutely fine for you to discuss any aspect of your counselling with anyone you choose, although it's probably a good idea to consider how much you share and whom you trust. Under normal circumstances nothing you say to your counsellor will be taken outside of the service - unless you want it to and you tell us explicitly. This means we won't reveal to other staff - or your family and friends - anything about you, your attendance, or discussions with us without your permission. We work to an ethical code (BACP Ethical Framework for Good Practice in Counselling and Psychotherapy) which does not allow us to breach confidentiality without good cause.

Counsellors are only allowed to pass on information with your permission under exceptional circumstances. These are very rare. However, if we are deeply concerned that there is a serious risk to yourself or others we may need to consult outside of the service, such as your GP or other mental health practitioner. We are therefore unable to guarantee complete confidentiality at these times. In such exceptional circumstances your counsellor will usually, if at all possible, discuss his/her concerns with you in the hope that some agreement can be reached about what is the best course of action. On these rare occasions your counsellor is also likely to consult with the Manager to make sure they are following an appropriate course of action.

We have a number of trainee counsellors working with the service. If they have particular concerns about your safety they are required to consult with the Manager and will not take any further action themselves, other than to discuss with you their reasons for their concerns. It is then likely that a more experienced member of the team will try to speak with you to ensure the best support possible.

Counselling supervision:

All counsellors are required to receive regular clinical supervision where they discuss and reflect upon their work. This ensures that the counsellor is providing the best service possible and offers him/her an opportunity to monitor and assess the quality of their work. These discussions may occur in a small group within the service, or with a supervisor external to the university. Care is taken not to identify any clients, other than by their first name.

Permission to contact others involved in supporting you:

Sometimes it is helpful for counsellors to be in touch with others who support you. However, unless we have exceptional concerns, we always seek your permission to be in contact with them and usually ask you to sign a consent form to make this explicit. If, for instance, you are taking prescribed medication, using a mental health service, or had previous therapy we may seek your agreement to liaise with the relevant person. Your counsellor will discuss with you why they think this might be helpful. We often find that you then feel more supported through difficult times.

Section B policy 6 Clinical Supervision Policy and procedure

POLICY

The aim of this policy is intended to provide a formalised framework for the development and implementation of clinical supervision for Counsellors, underpinned by national and local guidelines.

THE BIRCHALL TRUST recognises that clinical supervision is beneficial for professional development and improved client care. Clinical Supervision is a valid learning activity which supports the organisations commitment to continuing professional development.

What Clinical Supervision can do

- Enable practitioners to review their work processes with professional support, to share and learn from experience, sustaining and developing professional practice.
- Support staff and counsellors working with difficult and stressful cases
- Enable practitioners to gain confidence and validate good practice
- Develop professional skills and the knowledge base for care
- Stimulate practitioners to learn and develop their practice

What it doesn't do

- Direct care in individual cases
- Resolve professional conflicts
- Solve personal problems
- Provide an emotional outlet for disillusioned practitioners
- Undermine practitioner confidence in practice
- Collude with poor practice
- Act as substitute for effective performance management.

PROCEDURE

Individual clinical supervision

In order for clinical supervision to be effective, a recognised model should be used.

Depending on the context or content of professional practice, individuals should receive a minimum of 1.5 hours clinical supervision each month. This complies with BACP requirements for counselling.

Counsellors are required to access supervision in line with the guidelines provided by the British Association for Counselling and Psychotherapy (BACP).

It is the Managers responsibility to ensure that all counsellors receive clinical supervision and that they attend sessions in line with BACP requirements

It is the counsellor's responsibility to use clinical supervision sessions effectively.

The clinical supervisor will have a clinical background, knowledge of, and preferably training in the clinical supervision process. They may or may not be of the same professional background as the supervisee.

Rights and responsibilities

Supervisee's will;

- Attend designated sessions and agree the agenda for the supervision session, to be punctual and reliable.
- Identify a practice issue which they wish to explore and provide case records or other evidence which demonstrates their existing practice
- Agree and follow up any actions arising from clinical supervision sessions
- Identify learning needs from supervision and include these as objectives in Personal Development Plans

- Agree with their line manager the frequency and duration of sessions and their supervisor, and to inform their line manager about any issues which might affect the supervision process.

Supervisors will;

- Prepare for the sessions, using a recognised framework for clinical supervision, be punctual and reliable
- Demonstrate respect for supervisees and their clients, enabling supervisees to participate fully in sessions
- Focus on how high quality professional practice can be sustained.
- Encourage the supervisee to seek specialist help or advice when necessary
- Challenge behaviour that would cause concern about clinical practice, development or use of clinical supervision
- Clearly identify practice issues to be addressed and agree outcomes with supervisee/s
- Enable practitioners to explore and clarify their thinking by reflective practice and or critical analysis.
- Agree with the line manager the frequency and duration of sessions, record keeping and how any actions or issues arising from supervision will be addressed.
- Keep appropriate brief records of significant issues addressed, actions agreed and outcomes, sharing these with the supervisee
- Be aware of organisational constraints

Manager

- Ensure the service has a systematic process of support and supervision to help to early identification of problems with the performance of practitioners;
- Provide appropriate management supervision of staff and ensure that delegation of responsibility is exercised with proper regard to experience and competence;
- Ensure that Induction programmes and preparation are given to all practitioners

Confidentiality

- Records of supervision sessions should be agreed and maintained between the supervisor and the supervisee. They cannot be used in any disciplinary action. However, if issues have been raised concerning a breach of the relevant Code of Professional Conduct, this must be addressed with the supervisee's service manager so that they can take appropriate action.
- The Service Manager will be given notification of the date and time of each clinical supervision session, the supervisor and the supervisee.

Contracts and Record Keeping

- The initial agreement establishes the objectives, scope, frequency, duration and location of the clinical supervision sessions
- The supervisee can record the content of the session on a Clinical Supervision Record, which will be regarded as confidential with the supervisee retaining a copy for their records for professional revalidation and reaccreditation.
- Any record made by the supervisor will be open to the supervisee.
- A record will be kept of the date, time and attendee of each clinical supervision session by the supervisor
- Individual who fail to attend without good reason will be referred to their Service Manager.

Section B policy 7 Vulnerable adult's policy and procedure

POLICY

THE BIRCHALL TRUST is committed to ensuring that vulnerable people who use our service are not exploited or abused and that working practices minimise the risks of such abuse. If abuse is reported, or staff feel concerned about a situation of potential abuse, the following policy and procedure should be implemented.

Staff will be aware of and guard against possible discrimination because of assumptions about class, gender, sexuality, race, disability, religion and age.

Definition

The term vulnerable adults refers to people of 18 and over *"who are or maybe in need of community care services by reason of mental or other disability, age or illness or lack of opportunity; and who is or maybe unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation"*.

Adult protection concerns the violation of an individual's human and civil rights by another person or persons.

Abuse can include: verbal, physical, financial/material, sexual, psychological, discriminatory, emotional abuse and neglect. Abuse can take place in any setting, public or private, and can be perpetrated by anybody.

PROCEDURE

Awareness

All staff and counsellors involved in the provision of the service have a responsibility to be aware and alert to signs that all is not well with a vulnerable adult. All staff and volunteers will be made aware of the different types of abuse that may be experienced by vulnerable adults. Not all concerns relate to abuse and there may well be another explanation.

It is important while being vigilant to keep an open mind. If at all possible staff should discuss their concerns discretely and in confidence with the Manager and seek help through supervision, if they are concerned about a client or member of staff.

Further Action

- Having raised the issue with the Manager the staff member / volunteer should make a confidential personal note of the circumstances and if appropriate check whether there were any witnesses present.
- As part of the counselling process, the person will be supported by a counsellor, to feel empowered to participate in appropriate protective action being taken in conjunction with relevant agencies.
- The vulnerable adult should be informed that the staff member will be discussing the matter with the Manager.
- If the person who says they are being abused asks the staff member to do nothing at all, they should inform them that whilst respecting this, the staff member must share the information with the Manager.
- Staff / volunteers do not carry out an investigation. This must be left to the relevant agencies. You should also inform them that the information might be passed to the appropriate agencies
-
- The Manager will treat the matter as top priority and inform the Chair of the Board of Trustees.

- The Manager will seek advice urgently. This may involve discussing the situation with Social Services or with the Police. Social Services will instigate an assessment of the person's needs under Community Care legislation.
- The Manager will keep the Chair of the Board of Trustees informed, of all action taken to date.
- The Manager will keep the vulnerable adult informed at all times as to action being taken.

Support for Staff

The member of staff reporting incidents of suspected or potential abuse may find that the vulnerable adult is very upset or angry. The Manager will offer support as appropriate. Other support, for example, may include counselling provided by an outside body if required or by request.

Suspected abuse by an employee / volunteer

Suspected abuse by an employee / volunteer, where a member of staff is suspected of abuse the following action should be taken;

- The Manager should interview the member of staff or client with a witness or representative of their choice present.
- The Manager should make arrangements for interviewing the suspected victim; this should be done with a staff member, Trustee and a representative of the victim present
- The purpose of the meeting is not to investigate but to establish whether there are grounds for the allegation.
- The procedure outlined under **Further Action** should then be followed.

Confidentiality

- Confidentiality is crucial to all our work and relationships, the **Confidentiality Policy (section B policy 4)** should be strictly adhered to, except that the welfare of vulnerable adults is paramount and takes precedence over it.
- Staff / volunteers should not keep concerns relating to potential abuse of a vulnerable adult to themselves.
- Confidentiality may **NOT** be maintained if the withholding of information or evidence will prejudice the welfare of the adult.

Section B policy 8 Withdrawal and Refusal of Service Policy and Procedure

POLICY

THE BIRCHALL TRUST is committed to providing services to all individuals who require our services and to providing an environment that is acceptable to all clients and staff. There may be occasions when, with careful consideration, services are refused, withdrawn or limited for individual clients. This policy outlines the circumstances in which this may be appropriate, and details the procedures to be followed.

* **See our Access Policy (Section B policy 1)**

Awareness and policy review

All Counselling Service staff receive training on this policy during their induction.

Regular case supervision and team meetings ensure that awareness of this policy is maintained, and allow early detection of situations that might need to be dealt with under the policy.

Clients are made aware of this policy via:

- Copies available from the main office on request

This policy is reviewed annually by the Manager in consultation with service staff.

Duty of Care

The Service must give due consideration to mitigating factors or mental health difficulties that might be contributing to a client's behaviour, and staff must remain aware of Duty of Care obligations. If such factors appear to be relevant, appropriate advice, support, alternative service provision or external referral should be considered.

PROCEDURES

If staff members have concerns about a client in relation to this policy, the details should be discussed with the Manager in the first instance.

Every effort will be made to resolve a situation informally. If this is not successful or appropriate, every effort will be made to limit services rather than refuse or withdraw them. Refusal or withdrawal of services will only be made as a last resort.

Where a potential limitation, withdrawal or refusal of service is identified, the client must be made aware of this policy and be offered a copy.

Clients must be notified in writing by the main office, of any decision to withdraw or refuse Service. Written decisions should include:

- a clear explanation of why the decision has been made
- advice that the client has a right to complain about this decision under the organisations Complaints procedure:
- details of alternative service providers

A decision to limit service provision may be communicated verbally to the client and should include a clear explanation of why the decision has been made and details of alternative service providers. In extreme or unresolved cases it may be necessary to provide a written decision.

Accurate case notes must be kept of all discussions, advice and decisions

Specific guidance and procedures

Circumstances that may lead to limitation, withdrawal or refusal of service:

- client is threatening or using violence
- breach of THE BIRCHALL TRUST equal opportunities policy
- request for collusion with fraud or illegal activity
- inappropriate or excessive use of resources

This list is intended as a guide for both clients and staff. However, if an instance occurs that is outside these guidelines, which indicates that it is in neither party's interest for service use to continue, the Manager reserves the right to refuse service after careful consideration of the situation.

In addition to the general procedures outlined above, the following procedures should be followed.

Client is threatening or using violence

The Counselling Service aims to provide an environment that is safe for all clients, visitors and staff.

If staff are unable to resolve a situation effectively, or if a client is being violent, the nearest alarm button can be used to alert other staff, who should attend immediately.

The Manager will convene a meeting with all relevant staff members at the earliest convenience to agree action.

Client breaches the organisations Equal Opportunities Policy

The Counselling Service embraces the **Equal Opportunities policy (Section C Policy 2)** and **Harassment policy (Section A Policy 12)** of the organisation. We aim to provide an environment that is acceptable and accessible to all clients, visitors and staff and that enables all parties to be treated with dignity and respect.

If a client's behaviour is contrary to an equal opportunities environment, and informal measures do not rectify their behaviour, the service will consider alternative ways to deliver services to the client if appropriate, such as arranging a waiting area away from other clients or offering appointments via telephone or email.

At the point of informal resolutions the client should be informed that continuing to breach the organisations equal opportunities policy may result in refusal of service.

If effective alternative service delivery is impossible and informal measures to deal with a situation do not rectify the behaviour of a client, the Counselling Service may refuse or withdraw service in order to maintain an environment acceptable to other clients, visitors and staff. This decision is only likely to be taken in situations where behaviour is extreme and persistent.

Request for collusion with fraud or illegal activity

Staff must not knowingly assist clients with fraudulent applications or illegal activities.

If a staff member identifies a client who might knowingly or unknowingly be committing, or about to commit, a criminal offence, they must make the client aware of their obligations under UK law, the implications of their action and the steps they should take to rectify the situation.

If the client is unwilling to follow this advice, the Service cannot continue to advise or represent them on this particular issue (other than to reiterate obligations and implications etc). Staff may continue to work with the client on unrelated issues.

Inappropriate or excessive use of resources

The Birchall Trust has limited resources and aims to provide equal service to all clients. Resources in terms of staff time and expertise are not unlimited. The following actions may lead to withdrawal or limitation of services offered:

- Persistent requests for staff to undertake actions which they deem the student to be able to take themselves
- Requests for advice or services that are not within the remit of the service or exceed the expertise or competency of staff
- Long term support requirements that require substantial staff time which then has a detrimental affect on the ability to provide an acceptable level of service to other clients
- Refusal to pursue referral to other sources of support deemed to be more appropriate alternatives to services offered by the Counselling Service

Staff

A decision to refuse, withdraw or limit services must be reported to all staff and appropriate support offered to staff who are required to implement this decision.

Staff should raise concerns about unacceptable incidents or working conditions with their line manager in the first instance and then with the Board of Trustees. The Counselling Service is committed to providing a healthy and safe work environment where staff are treated with dignity and respect and where harassment of any kind is unacceptable.

Section B Policy 9

Access to Your Own Counselling Records - A Guide for clients

In keeping with the Data Protection Act (1998) the service aims to provide an open and transparent record system and actively supports clients who request access to their personal record. You have the right to see records that are kept about you. This includes all relevant handwritten and computerised documentation.

If you wish to see your notes you can choose between two alternative procedures. You can simply ask your counsellor informally or make a formal request under the Data Protection Act.

Informal requests

We like to take care to support you in viewing your counselling notes, as we take seriously the impact this can sometimes have on clients. If you ask to see your notes and are currently in counselling (or recently finished) your counsellor - or another member of the counselling team if appropriate - will suggest a discussion in the first instance to:

- a. consider with you the benefits or otherwise of reading your records.
- b. reflect on the best time to read the record (now or in a few weeks, for instance)
- c. consider any potential impact this may have upon you and what support you may need afterwards.
- d. discuss any documentation we would prefer to keep confidential e.g. information from third parties. Our support of your right to access your record needs to be balanced with third party rights to confidentiality (e.g. doctors, referring agents etc). However, we will strive to gain consent for the disclosure of relevant information from these third parties wherever possible. When it hasn't been possible to gain such consent, disclosure may still be possible in certain circumstances.
- e. consider with you any exceptional circumstances which lead your counsellor to feel unable to accede to your informal request, and to make clear to you why this is so. This would be really unusual, and based upon a respectful but professional judgement that access to your record is likely to cause serious harm (to you or others).

Once you and your counsellor have been able to fully consider the above, and it's still appropriate for you to read your record, we will copy your notes for your perusal. We recommend that you arrange a time to come into the service and read them when your counsellor can be on-hand to clarify or explain anything to you. We do not recommend that you take the notes away as such possibly sensitive and private material can easily fall into the wrong hands. In our service we take great care to keep all such information particularly secure. However, you can take your copy away with you if you wish.

Formal requests

Whilst we believe the above informal process is the most appropriate way for you to see any information we hold about you, under the DPA (1998), you also have a formal means to gain access to your counselling record. The service actively attempts to comply with the principles of this act. To make a formal request to see your notes you need to:

- a. contact the organisations data protection controller (DPC).
- b. You will be asked to complete a form stating which records you wish to see and asked to pay a small administration fee.
- c. THE BIRCHALL TRUST will then contact relevant individuals requesting that we supply all relevant documentation to that office. We then hand over a copy of your records in a sealed envelope. The organisation will then contact you once the information has been collated.

As a service we are required by law to comply with your request within forty days. We would, of course, normally seek to respond sooner. However, where we seek consent to disclosure from third parties, or

when the service is concerned that the release of such information could be harmful to you or others, there could be a delay in responding to your request.

Access to records by your solicitor

It is possible for you to request that your solicitor accesses your personal records on your behalf - this is most likely for the purposes of legal action (e.g. compensation claims). The service will give due professional and ethical consideration to such requests, but normally respond positively to the release of such documentation provided your consent has been explicitly confirmed. Your solicitor is also entitled, however, to make formal access requests and may use the DPA as a means of discovery.

Written reports for use in court proceedings

Sometimes solicitors request that counsellors prepare written reports for use in court proceedings. The service may sometimes consider this inappropriate. This is because it is inadvisable for counsellors to express professional opinions on particular issues (including diagnoses/mental health assessments), or to make recommendations to the Court, unless they have received formal training to do so. Responding to any such service requests will be made in consultation with the Head of Service.

Section C policy 1 Data Protection Policy and procedure

POLICY

THE BIRCHALL TRUST needs to keep certain personal information about its employees, volunteers and clients in order to carry out its proper business and organisational functions and to allow it to monitor performance, achievements and health & safety. It is also necessary to process information so that staff can be recruited and paid, counseling sessions organised and legal obligations to funding bodies complied with.

PROCEDURE

All staff and volunteers are responsible for:

- checking that any personal data that they provide to the organisation is accurate and up to date;
- informing the organisation of any changes to information, which they have provided, e.g. change of address, change of name;
- checking the information that the organisation may send out from time to time, giving details of information kept and processed about staff and volunteers;
- informing the organisation of any errors or changes in the personal data which it holds about them.

THE BIRCHALL TRUST cannot be held responsible for any errors unless the staff member or Volunteer has informed the organisation. This relates particularly to addresses and correct postcodes.

If, as part of their responsibilities, staff collect information about other people they must comply with the staff guidelines.

Data Security

The need to ensure that data is kept securely, means that precautions must be taken against physical loss or damage and both access and disclosure is restricted.

All staff are responsible for ensuring that the procedures stipulated by the organisation regarding the issues below are followed:

- Any personal data which they hold is kept securely;
- Personal information is not disclosed either orally or in writing or accidentally or otherwise to any unauthorised third party (if a member of staff is unsure about disclosing information they must not divulge anything until after reference to their line manager).

Personal information should be:

- kept in a locked filing cabinet; or
- in a locked drawer; or
- in an office with restricted access; or
- if it is computerised, be password protected; or
- kept only on disk which is itself kept securely.

Rights to Access Information

Unless there are any legally permitted reasons to the contrary, all staff, volunteers and other users are entitled to:

- know what information The Birchall Trust holds and processes about them and why;
- know how to gain access to it;
- be informed how to keep it up to date;
- be informed what the organisation is doing to comply with its obligations under the 1998 Act.

Staff, volunteers and other users of the organisation have the right to request a description of the personal data that is being kept about them. Any person who wishes to exercise this right should contact the manager in writing, noting that some form of identification will be required prior to the release of any data.

In any disclosure of information, care should be taken to ensure that a third party individual is not identified and, in such circumstances, the disclosure is only permitted where the third party has consented to the disclosure or the third party can be protected by anonymising the information.

The organisation aims to comply with requests for access to personal information as quickly as possible, but will ensure that it is provided within 40 days.

Section C policy 2 Equal Opportunities Policy and procedure

POLICY

THE BIRCHALL TRUST recognises that many people in our society experience discrimination or lack of opportunity for a variety of reasons. These include: race, religion, nationality and ethnicity, political beliefs, gender, sexual orientation, age, disability (including mental illness), health status, marital status, responsibility for/relationship to dependants, appearance, geographical location, social class, income level or criminal record.

THE BIRCHALL TRUST will challenge discrimination and lack of opportunity in its own policy and practice and will help other organisations and individuals to do the same.

THE BIRCHALL TRUST aims to create a culture that respects and values each others' differences and similarities. The organisation sees diversity as an asset to our work, improves our ability to meet the needs of the organisations and people we serve.

All volunteers, employees and committee members must declare their support for the objectives of this **Equal Opportunities Policy**. Failure to do so may result in disciplinary action and/or ineligibility to join the organisation.

What is discrimination?

THE BIRCHALL TRUST believes that discrimination can take one or more of the forms set out below.

Direct discrimination is treating one person less favourably than another in the same or similar circumstances or segregating them from others solely because they are, for example, a lesbian, a gay man or because they have a disability or illness. Refusing to employ someone who has the required skills because they are deaf or because they are pregnant would constitute such discrimination.

Indirect discrimination occurs where there is a requirement or condition which applies equally to everyone but which, in practice, has an adverse impact on a particular group and cannot be justified.

For example an unnecessary physical or age requirement can discriminate against women or disabled people. The setting of language tests, where language skills or fluency are not really needed for a job, is another example.

Abuse and/or harassment – Discrimination also covers actions which amount to abuse and/or harassment of people or groups of people because for example they are a member of a national, racial or ethnic minority group, a woman, a lesbian, a gay man or have a disability or illness.

Victimisation occurs when a person is treated less favourably or is discriminated against because she/he has pursued or intends to pursue their rights in respect of alleged discrimination.

Institutional racism (Macpherson Report, 1999)

The collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin. It can be seen in the processes or attitudes and behaviour, which amount to discrimination, to unwitting prejudice, ignorance, thoughtlessness and racist stereotyping which disadvantages minority ethnic people.

Racist incident (Macpherson Report, 1999)

Any incident which is perceived to be racist by the victim or any other person. If the victim doesn't want to complain, another person may do so.

Discrimination in any of the forms stated above is unacceptable, regardless of whether there was any intention to discriminate or not.

PROCEDURE

Staff development

Decisions about learning and development opportunities will be made in accordance with the THE BIRCHALL TRUST training and development policy and all staff / volunteers will have access to opportunities to enable them to develop in line with THE BIRCHALL TRUST's aims and objectives.

Service provision

All of THE BIRCHALL TRUST's services are covered by this policy.

THE BIRCHALL TRUST will promote equality and diversity in its work with other agencies or individuals.

THE BIRCHALL TRUST services will be reviewed regularly and changed where needed.

All Staff, volunteers and Trustees will be required to support our Equal Opportunities Policy.

Recruitment and selection

THE BIRCHALL TRUST believes that no person or group should be treated less favourably in employment because of the reasons given in the Statement of intent.

Staff / volunteer appointments will be monitored to ensure no discrimination is occurring at the point of selection.

*A separate **recruitment and selection policy (Section A policy 1)** gives full details of this process.*

Miscellaneous

Office accommodation

THE BIRCHALL TRUST will make every effort to ensure that premises used in relation to its work are accessible and inviting for staff, service users and others associated with the organisation.

Promotion of policy

Copies of this policy will be freely available to staff, volunteers, members and any other interested parties. A laminated copy of the Statement of intent, together with a named contact for more information, will be placed in a prominent position in the main office.

Implementation and monitoring

Monitoring of the Equal Opportunities Policy and its implementation is the responsibility of the Board of Trustees.

The Board will review the policy annually.

Induction for committee members and new staff will include a briefing on the Equal Opportunities Policy.

A copy of the Equal Opportunities Policy will be given to all new staff and volunteers

Training will be provided for employees and volunteers on cultural awareness, disability awareness and other subjects that will develop awareness of equality and diversity

THE BIRCHALL TRUST policies and procedures

Other THE BIRCHALL TRUST policies support our commitment to equality and diversity. These include, flexible working, parental and dependants leave, annual leave, recruitment, discipline, grievance, harassment, statement of terms and conditions and induction.

Section C policy 3
Health and safety policy and procedure
Health and Safety at Work Act 1974

Our statement of general policy is:

To provide adequate control of the health and safety risks arising from our work activities.

To consult with our employees on matters affecting their health and safety

To provide and maintain safe plant and equipment

To ensure safe handling and use of substances

To provide information, instruction and supervision for employees

To ensure all employees are competent to do their tasks and give them adequate training

To prevent accidents and cases of work related ill health

To maintain safe and healthy working conditions

To review and revise this policy as necessary at regular intervals

Signed;

Date;

Review date;

Responsibilities

1. Overall and final responsibility for health and safety is that of;

The Manager

2. Day to day responsibility for ensuring this policy is put into practice is delegated to;

The Administrator

3. To ensure the health and safety standards are maintained

The Manager

4. All employees / volunteers have to:

Co-operate with supervisors and managers on health and safety matters

Not interfere with anything provided to safeguard their health and safety

Take reasonable care of their own health and safety; and

Report all health and safety concerns to an appropriate person as detailed in this policy statement

Health and safety risks arising from our work activities

1. Risk assessments will be undertaken by;

The Manager

2. Action required removing / control risks will be approved by

Board of Trustees

3. Ensuring action required is implemented will be the responsibility of;

Manager

4. checking that implemented actions have been removed/reduced will be the responsibility of

Board of Trustees

5. Assessments will be reviewed every

6 months or when the work activity changes, whichever is soonest

Safe equipment

1. identification of all equipment needing maintenance will be the responsibility of

The Administrator

2. ensuring all identified maintenance is implemented will be the responsibility of

The Manager

3. any problems found with equipment should be reported to

The Manager

4. checking that all new equipment meets health and safety standards before it is purchased will be the responsibility of

The Manager

Safe handling and use of substances

1. Identification of all substances which require a COSHH assessment will be the responsibility of

The Administrator

2. Undertaking of COSHH assessments will be the responsibility of

The Administrator

3. Ensuring that all actions identified in the assessments are implemented will be the responsibility of

The Manager

4. Ensuring that all relevant employees are informed of the COSHH assessments will be the responsibility of

The Manager

5. checking that new substances can be used safely before they are purchased will be the responsibility of

The Administrator

6. assessments will be reviewed every

6 months or when the work activity changes, whichever is soonest

Information, instruction and supervision

1. The health and safety law poster is displayed at

The Kitchen

Competency for tasks and for training

1. Induction training will be provided for all employees / volunteers by

The Manager

2. training records are kept at/by

The personnel file - kept in the main office

3. training will be identified, arranged and monitored by

The Manager

Accidents, first aid and work related ill health

1. Health surveillance will be arranged by

The Manager

2. health surveillance records will be kept by / at

The Administrator in the Main Office

3. the first aid box(es) is are kept at

The Kitchen

4. the appointed person for first aid is / are

The Administrator

5. All accidents and cases of work related ill health are to be recorded in the accident book. The book is kept by / at

The Kitchen

6. reporting accidents, diseases and dangerous occurrences to the enforcing authority is the responsibility of

The Manager

Monitoring

1. investigation of accidents will be the responsibility of

The Manager

2. investigation of work-related causes of sickness absences will be the responsibility of

The Manager

3. Acting on investigation findings will be the responsibility of

The Manager / Board of Trustees

Emergency Procedures – fire and evacuation

1. ensuring the fire risk assessment is undertaken and implemented is the responsibility of

The Manager

2. escape routes are checked by / every

The Manager

3. fire extinguishers are maintained and checked by

The Administrator

4. alarms are tested by / every

Week The Administrator

Appendix

THE BIRCHALL TRUST Therapeutic Services - Overview

Children's Services up to the age of 12 yrs

Therapy is available to children that have been victims of sexual abuse, rape and incest, this therapy service is also available to others within the child's household who have been affected by the child's sexual abuse such as the parents/caregivers/ siblings/ relatives. Children referred to the service by social workers, police, other agencies or parent/carer, are assessed as to their suitability to the programme. The child is held on a waiting list and allocated qualified child/family therapist when one becomes available. The parent/carer is to accompany the young child to therapy and remain present in the building until the child is returned to the parent/carer by the therapist. It is a pre-requisite that all child sexual abuse both in the past or present has been report to the police and social services for investigation. It is not essential that the perpetrator has been convicted.

Child safety and protection supersedes THE BIRCHALL TRUST confidentiality.

Youth Services age 13yrs – 18 yrs

Counselling: Counselling is available to all youths referred and assessed as suitable to the programme. This service is carried out by a qualified therapist who is experienced in working with youths.

Protective Behaviours: Subject to available funds, a 'Protective Behaviours' programme is delivered to vulnerable groups e.g. schools, residential homes. This is to help young people identify their own strategies for keeping safe and where to access support.

Residential: Subject to available funds a residential is held annually for small groups of young people. This programme is to enable young people to meet new challenges through outdoor activities. This also includes other therapeutic programmes to help increase their self esteem, to set personal goals and reduce their sense of isolation through team building.

Adult services age 18 yrs and above

Counselling: Counselling is available for adults who are survivors of rape and/or childhood sexual abuse. They may self refer or they may be referred through an agency. This service is extended to partners/relatives/friends that have been affected by the sexual abuse.

Group therapy: Subject to available fund, group workshops are arranged periodically and the small groups are facilitated by a qualified Group Therapist.

**Area Child Protection Coordinator
The Manager- 01229 820828**

**60 Hartington St.
Barrow-in-Furness,
Cumbria LA14 5SR**