

**Standards Evidence**

**Organisations are required to complete the following sections, providing evidence on how they meet the PHA Quality Service Standards.**

**Section four:**

**Counselling Standards**

Name of Organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Project(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May 2019 Edition

| **Standard** | **What this means** | **What this might mean in practice** | **Linked standards** |
| --- | --- | --- | --- |
| **Criteria 8 Counselling**  |
| **C8.1** | The provision of counselling services is in line with the providers’ constitution and strategic direction. | The provision of counselling services is clearly set out in the remit of the provider and will support the achievement of organisational objectives. |  | C1.1 |
| **C8.2** | The organisation is assessed against the Core Standards and other relevant standards and the provision of counselling services are considered during this process. | All criteria set out within the **Core Standards** applies to all relevant services within the organisation. It is essential therefore that each relevant service is considered when assessing the organisation against **Core Standards**. Where other services specified within this document e.g. self-harm services are addressed through counselling, these standards **also** apply to the counselling service.  |  | C1.1 – C5.2C7.1 – C7.5 |
| **C8.3** | Counselling personnel have a level 4 Ofqual or equivalent diploma in counselling and a minimum of 150 hours clinically supervised practice hours. | This is the minimum qualification and experience that counsellors providing the service must have prior to beginning work on the contracted service. Specific services may require enhanced qualifications and experience as outlined in individual contracts.  |  | C2.4 |
| **C8.4** | Counselling personnel are accredited with the professional bodies below or a European or International equivalent relevant professional body or have a time framed action plan in place to work towards accreditation.* BACP / BABCP / UKCP / IACP / NCS Accredited Professional Registrant
 | Accreditation with a relevant professional body provides assurances that individuals have achieved a substantial level of experience and training which is approved by their member organisation.Unaccredited counsellors should work towards accreditation which must be achieved within the timeframe specified within the contract.Counsellors who are accredited with a professional body other than BACP / BABCP / UKCP / IACP or NCS Accredited Professional Registrant must demonstrate/provide evidence that the requirements/components of their accreditation equals that of BACP / BABCP / UKCP / IACP or NCS Accredited Professional Registrant. |  | C2.4 |
| **C8.5** | Counselling personnel have experience of working with the organisations primary target group(s) and focus, and are up to date with best practice guidance in their field.  | While it is acknowledged that the specific requirements of service users cannot be predicted, many organisations have a target group e.g. young people, LGB&T community etc. or work within a specific subject matter e.g. suicide ideation, bereavement, gender identity etc. Personnel should remain up to date with best practice guidance within their field. Organisations should recognise their limitation in relation to specific issues / target groups and refer / signpost as appropriate.  |  | C2.4C3.7 |
| **C8.6**  | All clients requesting counselling are responded to within a timely manner. | Response times will vary depending upon the service provided. Providers must ensure that clients are responded to within the timeframes as detailed in any service delivery contracts held. |  | C1.4  |
| **C8.7** | Counselling personnel are in receipt of appropriate clinical supervision in line with the requirements of their professional body. | Clinical supervision “is a formal process of professional support and learning which enables individual practitioners to develop knowledge and competence, assume responsibility for their own practice and enhance consumer protection and safety of care in complex clinical situations” (DH,1993). The ratio of clinical supervision to client contact varies between professional bodies, therefore it is necessary to ensure that the level of supervision received is in line with the professional body that relevant personnel are affiliated to.  |  |  |
| **C8.8** | Service providers and relevant personnel demonstrate an active commitment to self-care. | Self-care is about individuals taking responsibility for their own physical as well as mental and emotional wellbeing, and involves individuals being mindful of their own health, self and happiness.The ethos of self-care is two-fold. Firstly, do no harm. Secondly, to actively look after personal needs i.e. physical, social, emotional or spiritual.  |  | C2.3 C6.9 |