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Hillingdon Brain Tumour Group

**PROVISION OF ONE-TO-ONE  
COUNSELLING POLICY**



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Registered Charity

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# Hillingdon Brain Tumour Group

## PROVISION OF ONE-TO-ONE COUNSELLING POLICY

### 1. Introduction

The scope of the services offered by Hillingdon Brain Tumour Group is defined by the organisation ethos of supporting the clients and carers. Its' services are available to any client/carer registered with the charity.

### 2. Preliminary assessment procedure and criteria for acceptance

Individuals contacting Hillingdon Brain Tumour Group will be offered verbal information about the services currently available.

An initial telephone conversation or interview to assess the individual's suitability for the services will take into account:

- The circumstances that bring the client into contact with Hillingdon Brain Tumour Group.
- The nature of the support the client needs at the time of the referral.
- Whether Hillingdon Brain Tumour Group has services available to meet the client's needs within a reasonable time-frame.
- Whether Hillingdon Brain Tumour Group has expertise and skills appropriate to the client's needs.

This contact may be followed up by a face-to-face meeting with the counsellor to assess:

- Clients physical and current mental health needs.
- Other known risks (for example, self-harm or suicide attempts).

Individuals may also be given information about other services that may better help them, with the assurance that they may contact Hillingdon Brain Tumour Group again at a future time if required.

### 3. Client/Carer Counselling

Currently Hillingdon Brain Tumour Group offers ongoing Counselling, with the length of Counselling dependent on a consultation between the counsellor, supervisor and the management team.

In the initial two or three sessions the counsellor will, among other things, help the client share something of their experiences, feelings the client's support system and capacity for resilience. The counsellor will help the client to consider what they feel they need from the counselling. (how it may help them and where, in the first phase of the counselling, the focus of the work may need to be).

#### **4. Frequency of sessions**

The standard practice for Hillingdon Brain Tumour Group is for weekly sessions. However, clients may sometimes request, or counsellors may feel they wish to offer, less frequent sessions. Counsellors are expected to discuss any changes in frequency of sessions in supervision first, to explore the reasons for the changes and any issues involved.

There can sometimes be appropriate therapeutic benefit to spacing sessions, for example:

- In the final phase of the work, especially where there have not been any breaks up till now.
- Or to provide support over specific events like hospitalisation, respite care etc.
- Frequency of sessions may change unavoidably, for example, because of holidays or sickness (on the part of either the counsellor or the client) and these gaps may need to be discussed in supervision, as to the effect they may have on the work.

#### **5. Cancelled and missed appointments – general**

It sometimes arises that clients cancel or miss scheduled appointments for a variety of reasons. All such absences should be discussed in supervision to explore how to understand the issues involved and what action, if any, may be deemed necessary (for example, in contacting the client).

##### **5a. Cancelled appointments**

If cancellations occur frequently (for example twice in a row, or alternate weeks) the position needs to be discussed and reviewed in supervision. It may be appropriate that the counsellor explores the reasons for frequent cancellations and/or may need to discuss meetings with the client.

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##### **5b. Missed appointments (or where the client did not attend: DNA)**

Missed appointments are defined as occurring where the client has not given any notice of cancellation or it is received after the session. Missed appointments need to be discussed in supervision at the earliest opportunity because they raise particular concern, for example, as to the client's ability or willingness to commit to the counselling process at this time.

The standard here is that the counsellor, in addition to exploring the reasons for a missed session with their client, needs to encourage their client always to try to give notice of cancellation.

If a client has missed three consecutive appointments the counsellor should discuss this in supervision. The standard here is that the client is referred back to the Chair for follow-up by the charity (as against the counsellor following-up), *unless* the supervisor feels there are good therapeutic reasons for the counsellor making contact, to explore whether the client wishes to make one further appointment. If the client misses this appointment then the client should now be referred back to the office.

## **6. Reviews**

A feature of working in a time-limited way is to regularly review the work that is taking place and to review the focus of the work.

## **7. Requests for extensions**

A counsellor may have started forming a view as to whether a client may need longer than the initial sessions offered at an early stage in the counselling. The counsellor should discuss and review their assessment of the client's needs in supervision regularly. Sometimes a counsellor's initial view about the length of support needed can change as the work progresses.

After there has been a discussion between the counsellor and supervisor, the supervisor should discuss all requests for extensions with the management.

The consultation enables Hillingdon Brain Tumour Group to apply a consistent policy and be aware of the sorts of issues giving rise to requests. It is also an opportunity for the supervisor to put the counsellor's concerns, their own assessment and to explore the issues involved

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## **8. Further support**

If, during the period of an extension, the counsellor and supervisor's assessment is that a client will need further support with issues that are primarily not related to the caring or requires more specialist support (for example, with domestic abuse, alcohol or substance misuse), Hillingdon Brain Tumour Group can help in providing information about other services.

If the counsellor and supervisor's assessment is that a client will continue to need support for care related issues, beyond the period of the extension, the case would be discussed with the management team. Options that can be considered are whether the client could reapply to Hillingdon Brain Tumour Group after the end of the counselling. Sometimes a break has therapeutic merit in helping the client consolidate their progress. However, consideration can also be given to a continuation of the counselling without a break and the time-frame that may be appropriate, if the counsellor and supervisor feel there are exceptional circumstances that would merit this option. The decision of the management team is final.

## **9. Concluding points**

Volunteer counsellors joining Hillingdon Brain Tumour Group need to be aware of this policy and need to consider, if they are seeking a counselling placement, whether this way of working will satisfy their course requirements, including for producing case-studies. Consideration also needs to be given to prospective volunteer's ability or experience in working in a time-limited way.

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