



Counselling Provision Information for North Tyneside

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Counselling Information for North Tyneside

Introduction

The Community and Health Care Forum (CHCF) is a voluntary organisation based in Wallsend and working across the borough of North Tyneside. The CHCF is funded jointly by North Tyneside Primary Care Trust and North Tyneside Council to consult with North Tyneside residents on the planning and delivery of health and social care.

North Tyneside LINK commissioned the CHCF to map counselling provision in North Tyneside. The points that the LINK identified to be included in this report are to:

- Set out national policies
- Identify national standards in counselling provision
- Identify local research on the issue of counselling
- Contact the three local health trusts to find out what they provide in terms of counselling services, how much is offered and how it is accessed
- Create an up to date list of counselling services in North Tyneside delivered by the voluntary and community sector

Chapter 1

Background

NICE guidelines to counselling

The National Institute for Health and Clinical Excellence (NICE) recommends certain types of counselling (also known as 'talking therapies') as being helpful in treating a number of different health conditions.

Conditions where counselling may be helpful include:

- depression,
- anxiety,
- obsessive compulsive disorder (OCD),
- post-traumatic stress disorder (PTSD),
- long-term illnesses,
- eating disorders, such as anorexia nervosa and bulimia, and
- substance abuse.

The aims of counselling

Counselling aims to help people:

- discuss their problems honestly and openly,
- address issues which are preventing them from achieving their goals and ambitions, and
- achieve a more positive outlook on life.

Talking therapy

Everyone has different strategies for coping with their personal difficulties. People often deal with stressful situations and events by talking to their partner, a family member, or a friend. However, in certain situations, talking to a professional counsellor may prove more helpful.

Types of counselling

There are a number of different types of counselling. Each type aims to help people deal with negative thoughts and feelings, and enables them to make positive changes.

The main types of counselling are:

- cognitive behavioural therapy (CBT),
- psychodynamic therapy,
- humanistic therapy
- other types of talking therapies, such as group therapy and relationship therapy.

These therapies are discussed in more detail below.

Cognitive behavioural therapy (CBT)

Cognitive behavioural therapy (CBT) is a form of psychotherapy that aims to retrain a person's way of thinking to help them to deal with stressful situations.

CBT is used to help solve a number of problems such as:

- depression,
- anxiety,
- obsessive compulsive disorder (OCD),
- post-traumatic stress disorder (PTSD),
- managing long-term illness,
- eating disorders
- schizophrenia.

The National Institute for Health and Clinical Excellence (NICE) recommends CBT for all of these.

CBT was developed from two earlier types of psychotherapy that are described below.

Cognitive therapy - designed to change a person's thoughts, beliefs, attitudes, and expectations.

Behavioural therapy - designed to change a person's actions.

CBT is a talking therapy that is based around the idea that the way a person thinks about a situation affects the way that they act. In turn, a

person's actions influence the way they think and feel. It is therefore necessary to change both the act of thinking (cognition) and behaviour at the same time.

The NHS is using CBT more frequently, particularly for treating common conditions, such as depression and anxiety. CBT courses are usually short-term - for example, between six and 24 one-hour sessions.

Psychodynamic therapy

During psychodynamic therapy, a therapist will help a person explore how their personality and life experiences influence their current thoughts, feelings, relationships, and behaviour. This understanding enables them to deal with difficult situations more successfully.

Psychodynamic therapy can be used to help treat:

- depression,
- anxiety,
- post-traumatic stress disorder (PTSD),
- long-term physical health problems,
- eating disorders
- addictions

NICE recommends psychodynamic therapy for people with depression and other complex illnesses. Psychodynamic therapy is available privately and on the NHS in some areas. It usually lasts between several months and several years, but shorter courses are also available.

Humanistic therapy

Humanistic therapies take a holistic approach to a person's problem in order to help them develop to their full potential and live life to the full.

To achieve this, humanistic therapies incorporate the body, mind, emotions, behaviour, and spirituality. In addressing the problem, they also look at other people, including family, friends, society, and culture.

Humanistic therapies are often used to treat problems such as depression, anxiety, and addiction. NICE recommends this type of therapy for children and young people with mild depression and for some cases of schizophrenia.

Humanistic therapies are available both on the NHS and privately and, depending on the problem, can be either short- or long-term, although they usually last for at least several months.

Other talking therapies

Group therapy

The aim of group therapy is to help people find solutions to their problems by discussing them in a group setting. Sessions are led by a facilitator who helps by directing the flow of conversation.

NICE recommends group therapy for people with obsessive compulsive disorder (OCD), and for children and young people with mild depression

Relationship and family therapy

Relationship therapy is where couples who are experiencing difficulties with their relationship work with a therapist to try to resolve their problems. Family therapy is similar but involves a therapist working with a family who are experiencing problems.

NICE recommends relationship therapy for people who have tried individual therapy without success, and family therapy is recommended for children with depression, or where a family member has a condition such as anorexia nervosa or schizophrenia.

Interpersonal therapy

Interpersonal therapy focuses on how a person's mood can influence the way that they relate to others who are close to them. NICE recommends this type of counselling for people with eating disorders and depression.

Mindfulness-based therapies

Mindfulness-based therapies combine talking therapies with meditation. They are used to make positive changes by helping a person to reduce stress and cope with problematic thoughts and feelings. NICE recommends this type of therapy to help people avoid repeated bouts of depression.

Eye movement desensitisation and reprocessing (EMDR)

Eye movement desensitisation and reprocessing (EMDR) is a treatment method that uses eye movements to stimulate the brain. EMDR has been shown to make distressing memories feel less intense.

EMDR can be used to treat a number of traumas, such as addictions, accidents and injuries, phobias, and sexual, physical, or emotional abuse. NICE recommends EMDR for post-traumatic stress disorder (PTSD).

Motivational counselling

Motivational counselling involves talking about issues and problems that could prevent a person from achieving their goals and ambitions. NICE recommends this type of counselling for people who have a mental health problem, or a problem with alcohol, or substance, misuse.

Telephone counselling

Telephone counselling, such as the service provided by the Samaritans, provides the opportunity to talk to a therapist without having to meet them face-to-face. It may be available through charities or your employer. Alternatively, you may be able to receive counselling by email, or via the internet.

How counselling works

Counselling can help you to deal with a range of issues, from day-to-day worries, or concerns, to more serious, long-term psychological problems.

Counselling can help you to come to terms with distressing or traumatic events, such as the loss of a loved one, divorce, or confusion about your identity or sexual orientation. It can also be an effective way of dealing with long-term mental health problems, such as depression and anxiety.

A counsellor is someone who is trained to listen sympathetically to your problems, and suggest strategies that will help you to resolve issues and change your behaviour.

By talking about your concerns with you, the counsellor will be able to help you gain a better understanding of your feelings and actions, as well as suggesting ways for you to find your own solutions to your problems.

The counsellor may encourage you to identify issues more easily and take personal responsibility where appropriate. They can help you to recognise the effect of other people and their actions, and to explore alternative ways of coping.

It can be a great relief to be able to share your worries and fears with someone who will confirm your feelings, and help you to reach a positive solution.

Counselling can take a range of different formats:

- face-to-face,
- over the telephone
- by email.

You may be offered counselling as a single session, as a short-term course of sessions for a few weeks, or months, or as long-term arrangement that lasts for many months, or years.

Where to get counselling

Counselling on the NHS

Your GP, or another healthcare professional, may refer you to a qualified counsellor. In this situation, you will receive counselling through the NHS free of charge. In some areas, the choice of counsellors may be limited and there may be long waiting lists.

In England and Wales, many GP surgeries employ counsellors. If your GP surgery does not offer a counselling service, you may want to ask your GP about counselling as a possible treatment option for you.

The National Institute for Health and Clinical Excellence (NICE) provides recommendations about the therapies that should be prescribed for certain health conditions.

For certain conditions, it may be possible to get some types of therapy on the NHS. However, for other conditions, it may be more difficult to get these types of therapy.

Private counselling

Certain types of counselling may not be available on the NHS. For example, some types of psychotherapy may only be available from appropriate professionals, such as psychotherapists.

Therefore, you may need (or decide) to seek private counselling. The cost of private counselling can vary considerably - for example, a session can cost between £20-£100 an hour.

Charities and voluntary organisations

Some charities and independent voluntary organisations may offer counselling. These organisations will usually specialise in a particular type of treatment, or skill area, such as bereavement, marriage counselling, or family guidance.

You may also be able to access support groups through your local church, social services, or local community.

See section 5 - List of counselling services in North Tyneside delivered by the voluntary and community sector.



Chapter 2

National Policies

The British Association for Counselling and Psychotherapy (BACP) advises that as a non-statutory profession at present there are no recognised national standards, or policies on counselling. BACP is currently involved in the negotiations to establish statutory regulation within the next two years and it seems likely that the regulatory body will be the Health Professions Council.

As well as the developments in the NHS, There are a number of political initiatives regarding counselling children and young people which may have an impact on policy in the future:

In Wales there is a National Strategy for School Counselling which aims to make professional, accessible counselling available for all secondary school children in Wales over the next 3 years with funding from Welsh Assembly Government to support this. BACP led on a 6 month research project commissioned by WAG to support this.

See www.bacp.co.uk for more information

Chapter 3

Identify National Standards in Counselling Provision

As there are no recognised national standards on counselling at the moment BACP has established its own standards by means of the Accreditation standards for individual counsellors/psychotherapists; Counselling and Psychotherapy Training Courses; Supervisors; Trainers, details of which are all available from the BACP website. BACP members are all bound by the Ethical Framework for Good Practice and the Complaints Procedure therein. All voluntary and community sector groups that we have talked to subscribe to the BACP code of ethics and standards.

BACP Ethical Framework for Good Practice in Counselling and Psychotherapy

Ethics for counselling and psychotherapy

This statement, Ethics for Counselling and Psychotherapy, unifies and replaces all the earlier codes for counsellors, trainers and supervisors and is also applicable to counselling research, the use of counselling skills and the management of these services within organisations. It is intended to inform the practice of each member of the British Association for Counselling and Psychotherapy.

In this statement the term 'practitioner' is used generically to refer to anyone with responsibility for the provision of counselling or psychotherapy-related services. 'Practitioner' includes anyone undertaking the role(s) of counsellor, psychotherapist, trainer, educator, supervisor, researcher, provider of counselling skills or manager of any of these services. The term 'client' is used as a generic term to refer to the recipient of any of these services. The client may be an individual, couple, family, group, organisation or other specifiable social unit. Alternative names may be substituted for 'practitioner' and 'client' in the practice setting, according to custom and context.

This statement indicates an important development in approach to ethics within the Association. One of the characteristics of contemporary society is the coexistence of different approaches to ethics. This statement reflects this ethical diversity by considering:

- **Values**
- **Principles**
- **Personal moral qualities**

This selection of ways of expressing ethical commitments does not seek to invalidate other approaches. The presentation of different ways of conceiving ethics alongside each other in this statement is intended to draw attention to the limitations of relying too heavily on any single ethical approach. Ethical principles are well suited to examining the justification for particular decisions and actions. However, reliance on principles alone may detract from the importance of the practitioner's personal qualities and their ethical significance in the counselling or therapeutic relationship. The provision of culturally sensitive and appropriate services is also a fundamental ethical concern. Cultural factors are often more easily understood and responded to in terms of values. Therefore, professional values are becoming an increasingly significant way of expressing ethical commitment.

Values of counselling and psychotherapy

The fundamental values of counselling and psychotherapy include a commitment to:

- Respecting human rights and dignity
- Ensuring the integrity of practitioner-client relationships
- Enhancing the quality of professional knowledge and its application
- Alleviating personal distress and suffering
- Fostering a sense of self that is meaningful to the person(s) concerned
- Increasing personal effectiveness
- Enhancing the quality of relationships between people
- Appreciating the variety of human experience and culture
- Striving for the fair and adequate provision of counselling and psychotherapy services

Values inform principles. They represent an important way of expressing a general ethical commitment that becomes more precisely defined and action-orientated when expressed as a principle.

Ethical principles of counselling and psychotherapy

Principles direct attention to important ethical responsibilities. Each principle is described below and is followed by examples of good practice that have been developed in response to that principle.

Fidelity: honouring the trust placed in the practitioner

Being trustworthy is regarded as fundamental to understanding and resolving ethical issues. Practitioners who adopt this principle: act in accordance with the trust placed in them; regard confidentiality as an obligation arising from the client's trust; restrict any disclosure of

confidential information about clients to furthering the purposes for which it was originally disclosed.

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

This principle emphasises the importance of the client's commitment to participating in counselling or psychotherapy, usually on a voluntary basis. Practitioners who respect their clients' autonomy: ensure accuracy in any advertising or information given in advance of services offered; seek freely given and adequately informed consent; engage in explicit contracting in advance of any commitment by the client; protect privacy; protect confidentiality; normally make any disclosures of confidential information conditional on the consent of the person concerned; and inform the client in advance of foreseeable conflicts of interest or as soon as possible after such conflicts become apparent. The principle of autonomy opposes the manipulation of clients against their will, even for beneficial social ends.

Beneficence: a commitment to promoting the client's well-being

The principle of beneficence means acting in the best interests of the client based on professional assessment. It directs attention to working strictly within one's limits of competence and providing services on the basis of adequate training or experience. Ensuring that the client's best interests are achieved requires systematic monitoring of practice and outcomes by the best available means. It is considered important that research and systematic reflection inform practice. There is an obligation to use regular and on-going supervision to enhance the quality of the services provided and to commit to updating practice by continuing professional development. An obligation to act in the best interests of a client may become paramount when working with clients whose capacity for autonomy is diminished because of immaturity, lack of understanding, extreme distress, serious disturbance or other significant personal constraints.

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

Non-maleficence involves: avoiding sexual, financial, emotional or any other form of client exploitation; avoiding incompetence or malpractice; not providing services when unfit to do so due to illness, personal circumstances or intoxication. The practitioner has an ethical responsibility to strive to mitigate any harm caused to a client even when the harm is unavoidable or unintended. Holding appropriate insurance may assist in restitution. Practitioners have a personal responsibility to

challenge, where appropriate, the incompetence or malpractice of others; and to contribute to any investigation and/or adjudication concerning professional practice which falls below that of a reasonably competent practitioner and/or risks bringing discredit upon the profession.

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

The principle of justice requires being just and fair to all clients and respecting their human rights and dignity. It directs attention to considering conscientiously any legal requirements and obligations, and remaining alert to potential conflicts between legal and ethical obligations. Justice in the distribution of services requires the ability to determine impartially the provision of services for clients and the allocation of services between clients. A commitment to fairness requires the ability to appreciate differences between people and to be committed to equality of opportunity, and avoiding discrimination against people or groups contrary to their legitimate personal or social characteristics. Practitioners have a duty to strive to ensure a fair provision of counselling and psychotherapy services, accessible and appropriate to the needs of potential clients.

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

The principle of self-respect means that the practitioner appropriately applies all the above principles as entitlements for self. This includes seeking counselling or therapy and other opportunities for personal development as required. There is an ethical responsibility to use supervision for appropriate personal and professional support and development, and to seek training and other opportunities for continuing professional development. Guarding against financial liabilities arising from work undertaken usually requires obtaining appropriate insurance. The principle of self-respect encourages active engagement in life-enhancing activities and relationships that are independent of relationships in counselling or psychotherapy.

Personal moral qualities

The practitioner's personal moral qualities are of the utmost importance to clients. Many of the personal qualities considered important in the

provision of services have an ethical or moral component and are therefore considered as virtues or good personal qualities. It is inappropriate to prescribe that all practitioners possess these qualities, since it is fundamental that these personal qualities are deeply rooted in the person concerned and developed out of personal commitment rather than the requirement of an external authority. Personal qualities to which counsellors and psychotherapists are strongly encouraged to aspire include:

Empathy: the ability to communicate understanding of another person's experience from that person's perspective.

Sincerity: a personal commitment to consistency between what is professed and what is done.

Integrity: commitment to being moral in dealings with others, personal straightforwardness, honesty and coherence.

Resilience: the capacity to work with the client's concerns without being personally diminished.

Respect: showing appropriate esteem to others and their understanding of themselves.

Humility: the ability to assess accurately and acknowledge one's own strengths and weaknesses.

Competence: the effective deployment of the skills and knowledge needed to do what is required.

Fairness: the consistent application of appropriate criteria to inform decisions and actions.

Wisdom: possession of sound judgement that informs practice.

Courage: the capacity to act in spite of known fears, risks and uncertainty.

BACP Conclusion

The challenge of working ethically means that practitioners will inevitably encounter situations where there are competing obligations. In such situations it is tempting to retreat from all ethical analysis in order to escape a sense of what may appear to be unresolvable ethical tension. These ethics are intended to be of assistance in such circumstances by directing attention to the variety of ethical factors that may need to be taken into consideration and to alternative ways of approaching ethics that may prove more useful. No statement of ethics can totally alleviate the difficulty of making professional judgements in circumstances that may be constantly changing and full of uncertainties. By accepting this statement of ethics, members of the British Association for Counselling

and Psychotherapy are committing themselves to engaging with the challenge of striving to be ethical, even when doing so involves making difficult decisions or acting courageously.

Guidance on good practice in counselling and psychotherapy

The British Association for Counselling and Psychotherapy is committed to sustaining and advancing good practice. This guidance on the essential elements of good practice has been written to take into account the changing circumstances in which counselling and psychotherapy are now being delivered, in particular:

- changes in the range of issues and levels of need presented by clients
- the growth in levels of expertise available from practitioners with the expansion in the availability of training and consultative support/supervision
- the accumulated experience of this Association over nearly three decades.

The diversity of settings within which counselling and psychotherapy services are delivered has also been carefully considered. These services may be provided by the independent practitioner working alone, one or more practitioners working to provide a service within an agency or large organisation, specialists working in multidisciplinary teams, and by specialist teams of counsellors and psychotherapists. Most work is undertaken face to face but there are also a growing number of telephone and online services.

Some practitioners are moving between these different settings and modes of delivery during the course of their work and are therefore required to consider what constitutes good practice in different settings. All practitioners encounter the challenge of responding to the diversity of their clients and finding ways of working effectively with them. This statement therefore responds to the complexity of delivering counselling and psychotherapy services in contemporary society by directing attention to essential issues that practitioners ought to consider and resolve in the specific circumstances of their work.

Providing a good standard of practice and care

All clients are entitled to good standards of practice and care from their practitioners in counselling and psychotherapy. Good standards of practice and care require professional competence; good relationships

with clients and colleagues; and commitment to and observance of professional ethics.

Good quality of care

1. Good quality of care requires competently delivered services that meet the client's needs by practitioners who are appropriately supported and accountable.

2. Practitioners should give careful consideration to the limitations of their training and experience and work within these limits, taking advantage of available professional support. If work with clients requires the provision of additional services operating in parallel with counselling or psychotherapy, the availability of such services ought to be taken into account, as their absence may constitute a significant limitation.

3. Good practice involves clarifying and agreeing the rights and responsibilities of both the practitioner and client at appropriate points in their working relationship.

4. Dual relationships arise when the practitioner has two or more kinds of relationship concurrently with a client, for example client and trainee, acquaintance and client, colleague and supervisee. The existence of a dual relationship with a client is seldom neutral and can have a powerful beneficial or detrimental impact that may not always be easily foreseeable. For these reasons practitioners are required to consider the implications of entering into dual relationships with clients, to avoid entering into relationships that are likely to be detrimental to clients, and to be readily accountable to clients and colleagues for any dual relationships that occur.

5. Practitioners are encouraged to keep appropriate records of their work with clients unless there are adequate reasons for not keeping any records. All records should be accurate, respectful of clients and colleagues and protected from unauthorised disclosure. Practitioners should take into account their responsibilities and their clients' rights under data protection legislation and any other legal requirements.

6. Clients are entitled to competently delivered services that are periodically reviewed by the practitioner. These reviews may be conducted, when appropriate, in consultation with clients, supervisors, managers or other practitioners with relevant expertise.

Maintaining competent practice

7. All counsellors, psychotherapists, trainers and supervisors are required to have regular and on-going formal supervision/consultative support for their work in accordance with professional requirements. Managers, researchers and providers of counselling skills are strongly encouraged to review their need for professional and personal support and to obtain appropriate services for themselves.

8. Regularly monitoring and reviewing one's work is essential to maintaining good practice. It is important to be open to, and conscientious in considering, feedback from colleagues, appraisals and assessments. Responding constructively to feedback helps to advance practice.

9. A commitment to good practice requires practitioners to keep up to date with the latest knowledge and respond to changing circumstances. They should consider carefully their own need for continuing professional development and engage in appropriate educational activities.

10. Practitioners should be aware of and understand any legal requirements concerning their work, consider these conscientiously and be legally accountable for their practice.

Keeping trust

11. The practice of counselling and psychotherapy depends on gaining and honouring the trust of clients.

Keeping trust requires:

- attentiveness to the quality of listening and respect offered to clients
- culturally appropriate ways of communicating that are courteous and clear
- respect for privacy and dignity
- careful attention to client consent and confidentiality

12. Clients should be adequately informed about the nature of the services being offered. Practitioners should obtain adequately informed consent from their clients and respect client's right to choose whether to continue or withdraw.

13. Practitioners should ensure that services are normally delivered on the basis of the client's explicit consent. Reliance on implicit consent is more vulnerable to misunderstandings and is best avoided unless there are sound reasons for doing so. Overriding a client's known wishes or consent is a serious matter that requires commensurate justification.

Practitioners should be prepared to be readily accountable to clients, colleagues and professional body if they override a client's known wishes.

14. Situations in which clients pose a risk of causing serious harm to themselves or others are particularly challenging for the practitioner. These are situations in which the practitioner should be alert to the possibility of conflicting responsibilities between those concerning their client, other people who may be significantly affected, and society generally. Resolving conflicting responsibilities may require due consideration of the context in which the service is being provided. Consultation with a supervisor or experienced practitioner is strongly recommended, whenever this would not cause undue delay. In all cases, the aim should be to ensure for the client a good quality of care that is as respectful of the client's capacity for self-determination and their trust as circumstances permit.

15. Working with young people requires specific ethical awareness and competence. The practitioner is required to consider and assess the balance between young people's dependence on adults and carers and their progressive development towards acting independently. Working with children and young people requires careful consideration of issues concerning their capacity to give consent to receiving any service independently of someone with parental responsibilities and the management of confidences disclosed by clients.

16. Respecting client confidentiality is a fundamental requirement for keeping trust. The professional management of confidentiality concerns the protection of personally identifiable and sensitive information from unauthorised disclosure. Disclosure may be authorised by client consent or the law. Any disclosures should be undertaken in ways that best protect the client's trust. Practitioners should be willing to be accountable to their clients and to their profession for their management of confidentiality in general and particularly for any disclosures made without their client's consent.

17. Practitioners should normally be willing to respond to their client's requests for information about the way that they are working and any assessment that they may have made. This professional requirement does not apply if it is considered that imparting this information would be detrimental to the client or inconsistent with the counselling or psychotherapeutic approach previously agreed with the client. Clients

may have legal rights to this information and these need to be taken into account.

18. Practitioners must not abuse their client's trust in order to gain sexual, emotional, financial or any other kind of personal advantage. Sexual relations with clients are prohibited. 'Sexual relations' include intercourse, any other type of sexual activity or sexualised behaviour. Practitioners should think carefully about, and exercise considerable caution before, entering into personal or business relationships with former clients and should expect to be professionally accountable if the relationship becomes detrimental to the client or the standing of the profession.

19. Practitioners should not allow their professional relationships with clients to be prejudiced by any personal views they may hold about lifestyle, gender, age, disability, race, sexual orientation, beliefs or culture.

20. Practitioners should be clear about any commitment to be available to clients and colleagues and honour these commitments.

Teaching and training

21. All practitioners are encouraged to share their professional knowledge and practice in order to benefit their clients and the public.

22. Practitioners who provide education and training should acquire the skills, attitudes and knowledge required to be competent teachers and facilitators of learning.

23. Practitioners are required to be fair, accurate and honest in their assessments of their students.

24. Prior consent is required from clients if they are to be observed, recorded or if their personally identifiable disclosures are to be used for training purposes.

Supervising and managing

25. Practitioners are responsible for clarifying who holds responsibility for the work with the client.

26. There is a general obligation for all counsellors, psychotherapists, supervisors and trainers to receive supervision/consultative support independently of any managerial relationships.

27. Supervisors and managers have a responsibility to maintain and enhance good practice by practitioners, to protect clients from poor practice and to acquire the attitudes, skills and knowledge required by their role.

Researching

28. The Association is committed to fostering research that will inform and develop practice. All practitioners are encouraged to support research undertaken on behalf of the profession and to participate actively in research work.

29. All research should be undertaken with rigorous attentiveness to the quality and integrity both of the research itself and of the dissemination of the results of the research.

30. The rights of all research participants should be carefully considered and protected. The minimum rights include the right to freely given and informed consent, and the right to withdraw at any point.

31. The research methods used should comply with the standards of good practice in counselling and psychotherapy and must not adversely affect clients.

Fitness to practise

32. Practitioners have a responsibility to monitor and maintain their fitness to practise at a level that enables them to provide an effective service. If their effectiveness becomes impaired for any reason, including health or personal circumstances, they should seek the advice of their supervisor, experienced colleagues or line manager and, if necessary, withdraw from practice until their fitness to practise returns. Suitable arrangements should be made for clients who are adversely affected.

If things go wrong with own clients

33. Practitioners should respond promptly and appropriately to any complaint received from their clients. An appropriate response in agency-based services would take account of any agency policy and procedures.

34. Practitioners should endeavour to remedy any harm they may have caused to their clients and to prevent any further harm. An apology may be the appropriate response.

35. Practitioners should discuss, with their supervisor, manager or other experienced practitioner(s), the circumstances in which they may have harmed a client in order to ensure that the appropriate steps have been taken to mitigate any harm and to prevent any repetition.

36. Practitioners are strongly encouraged to ensure that their work is adequately covered by insurance for professional indemnity and liability.

37. If practitioners consider that they have acted in accordance with good practice but their client is not satisfied that this is the case, they may wish to use independent dispute resolution, for example: seeking a second professional opinion, mediation, or conciliation where this is both appropriate and practical.

38. Clients should be informed about the existence of the Professional Conduct Procedure of this Association and any other applicable complaints or disciplinary procedures. If requested to do so, practitioners should inform their clients about how they may obtain further information concerning these procedures.

Responsibilities to all clients

39. Practitioners have a responsibility to protect clients when they have good reason for believing that other practitioners are placing them at risk of harm.

40. They should raise their concerns with the practitioner concerned in the first instance, unless it is inappropriate to do so. If the matter cannot be resolved, they should review the grounds for their concern and the evidence available to them and, when appropriate, raise their concerns with the practitioner's manager, agency or professional body.

41. If they are uncertain what to do, their concerns should be discussed with an experienced colleague, a supervisor or raised with this Association.

42. All members of this Association share a responsibility to take part in its professional conduct procedures whether as the person complained against or as the provider of relevant information.

Working with colleagues

The increasing availability of counselling and psychotherapy means that most practitioners have other practitioners working in their locality, or may be working closely with colleagues within specialised or multidisciplinary teams. The quality of the interactions between practitioners can enhance or undermine the claim that counselling and psychotherapy enable clients to increase their insight and expertise in personal relationships. This is particularly true for practitioners who work in agencies or teams.

Working in teams

43. Professional relationships should be conducted in a spirit of mutual respect. Practitioners should endeavour to attain good working relationships and systems of communication that enhance services to clients at all times.

44. Practitioners should treat all colleagues fairly and foster equality opportunity.

45. They should not allow their professional relationships with colleagues to be prejudiced by their own personal views about a colleague's lifestyle, gender, age, disability, race, sexual orientation, beliefs or culture. It is unacceptable and unethical to discriminate against colleagues on any of these grounds.

46. Practitioners must not undermine a colleague's relationships with clients by making unjustified or unsustainable comments.

47. All communications between colleagues about clients should be on a professional basis and thus purposeful, respectful and consistent with the management of confidences as declared to clients.

Awareness of context

48. The practitioner is responsible for learning about and taking account of the different protocols, conventions and customs that can pertain to different working contexts and cultures.

Making and receiving referrals

49. All routine referrals to colleagues and other services should be discussed with the client in advance and the client's consent obtained

both to making the referral and also to disclosing information to accompany the referral. Reasonable care should be taken to ensure that:

- the recipient of the referral is able to provide the required service
- any confidential information disclosed during the referral process will be adequately protected
- the referral will be likely to benefit the client.

50. Prior to accepting a referral the practitioner should give careful consideration to:

- the appropriateness of the referral
- the likelihood that the referral will be beneficial to the client
- the adequacy of the client's consent for the referral

If the referrer is professionally required to retain overall responsibility for the work with the client, it is considered to be professionally appropriate to provide the referrer with brief progress reports. Such reports should be made in consultation with clients and not normally against their explicit wishes.

Probity in professional practice

Ensuring the probity of practice is important both to those who are directly affected but also to the standing of the profession as a whole.

Providing clients with adequate information

51. Practitioners are responsible for clarifying the terms on which their services are being offered in advance of the client incurring any financial obligation or other reasonably foreseeable costs or liabilities.

52. All information about services should be honest, accurate, avoid unjustifiable claims, and be consistent with maintaining the good standing of the profession.

53. Particular care should be taken over the integrity of presenting qualifications, accreditation and professional standing.

Financial arrangements

54. Practitioners are required to be honest, straightforward and accountable in all financial matters concerning their clients and other professional relationships.

Conflicts of interest

55. Conflicts of interest are best avoided, provided they can be reasonably foreseen in the first instance and prevented from arising. In deciding how to respond to conflicts of interest, the protection of the client's interests and maintaining trust in the practitioner should be paramount

Care of self as a practitioner

Attending to the practitioner's well-being is essential to sustaining good practice.

56. Practitioners have a responsibility to themselves to ensure that their work does not become detrimental to their health or well-being by ensuring that the way that they undertake their work is as safe as possible and that they seek appropriate professional support and services as the need arises.

57. Practitioners are entitled to be treated with proper consideration and respect that is consistent with this Guidance

Professional Conduct Procedure

BACP have a robust complaints procedure - further information may be obtained by contacting the Professional Conduct Department at BACP directly; alternatively, all documentation is available on the BACP website at www.bacp.co.uk.

Skills for Health - also developing standards

Skills for Health (SfH) are working with practitioners, professional organisations and experts to develop National Occupational Standards (NOS) for Psychological Therapies. The development of NOS in this area will make a timely and significant contribution to a number of UK initiatives in this area.

The project will focus on the delivery of Psychological Therapy and will focus on four therapy areas covering adults and children:

- Cognitive Behaviour Therapy

- Psychodynamic Psychoanalytic Therapy
- Systemic and Family Therapy
- Humanistic Person-centred / Process Experiential (working title)

This project links with various initiatives across the UK. To reflect these links the project has strategic representation from the health departments of England, Scotland, Northern Ireland and Wales. The Health Professions Council (HPC) also has representation as well as the Children’s and Adolescent Mental Health Service (CAMHS) and the National Institute for Mental Health Education (NIMHE).

Practitioners with relevant expertise are working with University College London to identify the evidence base used to inform the development of the NOS for each of the four modalities.

NOS can be used to:

- Support role development and redesign
- Help shape services to meet client need
- Aid personal development for individual practitioners
- Inform qualifications and training programme developers of what skills and competences practitioners need
- Inform commissioners of Psychological Therapies



Skills for Health Consultation

The consultation on the CBT and Psychoanalytic/Psychodynamic NOS has now closed, however the consultation process for the remainder of the project is as follows:

- Family and Systemic Therapy open until 30th June 2009

- 4th Modality (Humanistic) opens mid June to mid September 2009

Organisations and individuals can contribute to the consultation through the Skills for Health website:

www.skillsforhealth.org.uk/psychologicaltherapies

Skills for Health is one of 25 sector skills councils which make up the Skills for Business Network. The UK Commission for Employment and Skills (UKCES) supports and monitors Sector Skills Councils who are licensed by the Secretary of State for Education and Skills, in consultation with ministers in Scotland, Wales and Northern Ireland. The Commission is a key recommendation in Lord Leitch's 2006 review of Skills in the UK; its ambition is to benefit employers, individuals and government by advising how improved employment and skills systems can help the UK become a world-class leader in productivity, in employment and in having a fair and inclusive society.

Sector Skills Councils together with sector employers and partners develop, maintain and update National Occupational Standards as the needs of industry change, work patterns shift and as practices, legislation and technologies change.

This project finishes on the 31st October 2009.

Chapter 4

Local Research on the Issue of Counselling

Project:

Improving the mental health and well-being of children and young people in the North-East of England: how can school counselling help?

From September 2008 to August 2009

Sponsors: Faculty Research Fund HASS Newcastle University

Aims

To collect a range of qualitative data to answer the question 'How can school counselling help to improve the mental health and well-being of primary and secondary school children in North-East schools?'

Objectives:

- a) to obtain views of children, school counsellors, teachers, learning mentors, parents
- b) to map these views against contemporary theory, practice and policy
- c) to move towards a conceptual understanding of how school counselling may help
- d) to identify any 'gaps' between the perspectives of the various groups
- e) to highlight issues related to the operationalisation of conceptual understandings in practice.

Methodology

Explorative qualitative research with children, school counsellors, teachers, learning mentors and parents. Schools: 4 primary and 8 secondary; rural and urban in 4 areas of the North-East: Northumberland; County Durham; Tyneside; Tees Valley. Data will be collected by audio-recorded semi-structured interviews; focus groups with children; ethnographic school-based conversations and observations with teaching staff. Data will be analysed, gaps and ethical issues addressed according to The Economic and Social Research Council (ESRC), British Educational Research Association (BERA) and British Association for Counselling & Psychotherapy (BACP).

Future Research to be undertaken by Newcastle University (timescale unknown) include:

1. Counselling in education and exploring the 'hidden voices' of young people with learning disabilities in counselling.
2. Evaluating school counselling in County Durham.
3. A national evaluation of the effectiveness of counselling for young people in Britain (Youth Access)
4. Multi-cultural counselling practices and processes

The Government is committed to expanding access to psychological therapies such as counselling and cognitive behavioural therapy as a positive alternative to medication, and The Secretary of State for Health has announced a £170million investment in therapy services. This funding will provide even better support for people with mental health problems, and will give them a real choice of treatment, helping to reduce dependence on medication.

By 2010/11, the NHS will spend £170million per year on psychological therapies, with more than £30million in 2008/9 and more than £100million in 2009/10. This investment will mean:

- 900,000 more people will be treated for depression and anxiety, many of whom will achieve measurable recovery;
- all GP practices will have access to psychological therapies as the programme rolls out; and
- the average waiting time for psychological treatments will reduce from the current 18 months to a few weeks.

Chapter 5

North of Tyne, Tyne and Wear NHS Trust and Northumbria Healthcare NHS Foundation Trust Counselling Services

Depending on where people live in North Tyneside they may be referred to services in North Tyneside, Newcastle or Northumberland.

Northumbria Healthcare NHS Foundation Trust

The Trust's Health Psychology Service provides clinical health psychology services to specific funded areas/teams within the acute Trust. Clinical staff comprise of clinical psychologists, a counselling psychologist, psychotherapist, counsellor and psychological/CBT therapists so a range of psychological therapies including counselling are provided.

Currently the clinical health psychology services funded to work in the Trust cover Diabetes, Cardiology/Healthy Hearts, Chronic Pain, Bariatrics/Weight management, Oncology and Surgery, Paediatrics, Respiratory Medicine, Womens Health (obstetrics and gynaecology). This means there are areas in the trust which are not covered but that's dependent on funding being present for psychology posts.

Each specialty area has its own psychology lead and referral criteria. Health Psychology works predominantly with people who have specific physical health issues with psychological distress/difficulties around these. Mainly referrals come via the Trust teams the psychologist/therapist is linked into, although some speciality areas are able to receive direct GP referrals.

Women's Health Psychology and Counselling Service

This service is staffed by qualified practitioners – an adult psychotherapist and a clinical psychologist. They are experienced in dealing with the psychological problems that can arise from an obstetric or gynaecological condition or procedure.

These are some examples of problems where a psychological intervention can be useful:

- Help with managing the stress of fertility problems or treatment.
- Worries about medical procedures during pregnancy, childbirth or in the treatment of gynaecological conditions.

- Getting help with making decisions about treatment.
- Managing pain which may have a physical reason but which affects your life.
- Shock and distress when things do not go as expected.
- Coming to terms with loss or bereavement.
- Concerns about depression and anxiety

Referrals can be made by any hospital staff member or your doctor or nurse in primary care.

A psychological intervention usually involves an initial discussion. Patients are encouraged to explore their difficulties from their particular perspective so that they have a clear understanding of the problem or concern, and why it doesn't resolve itself. The psychological therapist can then help the patient make changes so that they feel better or come to terms with their difficulty.

Each session lasts for 45 – 50 minutes. Often one or two sessions are enough but sometimes some problems take longer to resolve.

Northumbria Healthcare NHS Foundation Trust also has hospital chaplains; two full time at Wansbeck hospital and North Tyneside hospital are trained and very experienced in counselling. Although this isn't a formal health service referral process they are well used by staff and patients. All of the chaplains, full and part-time, provide a lot of informal counselling and a listening ear for patients and relatives in tough times. Anybody can go and see the chaplain or they can ask them to come onto the ward to visit them, it's not specifically religious guidance they provide, unless required, they are really useful neutral people.

Contacts

Health Psychology Service
 North Tyneside General Hospital
 Rake Lane, North Shields NE29 8NH
 0191-293-4193

Health Psychology Service
 Wansbeck General Hospital
 Woodhorn Lane, Ashington, Northumberland
 NE63 9JJ
 01670-521212 ext 6150

North Tyneside

Primary Care Counselling and Psychology

Primary care psychologists provide psychological assessment and treatment to adults who live in North Tyneside and who are suffering from common mental health problems. The services are attached to local GP practices and health centres in the local area. Primary care psychologists can help people with a wide range of difficulties. Below are some of the common reasons for adults to be referred to the service:

- Depression (including post-natal depression)
- Anxiety and excessive worry
- Social phobia
- Anger management
- Early problems
- Specific phobias
- Panic disorder
- Agoraphobia
- Health anxiety
- Post-traumatic stress disorder
- Problems related to childhood trauma

Access to the service

Patients of North Tyneside GP practices can access the service via their GP who will refer them.

Contact details

The Primary Care psychologists are based at:
The Psychology Department
Wallsend Health Centre
The Green
Wallsend
NE28 7PD.
Tel: 0191 220 5932

The 'generic' mental health team are based within primary care and attached to GP practices. In North Tyneside there are counselling services, primary care clinical psychology services and linked to this, the newly developed IAPT service (Increasing Access to Psychological Therapies). IAPT involves training people to deliver Cognitive Behavioural Therapy to people with anxiety and depression.

The IAPT service in North Tyneside is now in place and progressing very nicely. However the new trainees are only just now beginning to see patients (on a supervised basis), therefore they are still not up to full capacity (and are unlikely to be until after the first year).

Newcastle

Primary Care Psychology

Primary care psychologists work with general practitioners (GPs) and other professional health care staff to help people overcome difficulties associated with mental health. The service specialises in providing short term help for people experiencing moderate to severe difficulties associated with anxiety, depression, obsessive compulsive disorder, the psychological effects of trauma, eating difficulties, substance and other dependencies, coping with physical health difficulties and personal loss or bereavement.

The help provided can be in the form of:

- Stress control classes
- Anger management classes
- Computerised cognitive behaviour therapy 'Beating the Blues'TM
- Direct psychological therapy

Beating the Blues - therapy for mild depression

'Beating the Blues'TM is an interactive computer programme designed to help people who feel depressed or anxious.

The programme uses Cognitive behavioural Therapy (CBT) which is one of the most effective and practical methods for treating depression and anxiety. 'Beating the Blues'TM helps people understand the links between how you think, feel and behave, and teaches you skills to cope with everyday problems, both now and in the future.

The course consists of 8 sessions which can be completed weekly. These are completed alone, with a clinical helper on hand to provide any further help.

To access 'Beating the Blues'TM you will need to be registered with a GP in Newcastle.

You can be referred to the programme through your GP or you can self-refer by contacting the health psychology team on 0191 2563031.

The programme is available in a number of GP surgeries throughout Newcastle. You do not need to be registered with that particular surgery to attend for 'Beating the Blues'TM. Sessions are available from 9.00 am to 5.00 pm at the following locations:

Monday: Prospect Medical Group, Westgate Rd, Fenham

Tuesday: Molineux Street Primary Care Centre, Byker

Wednesday: Holmside Medical Group, Armstrong Rd, Benwell

Thursday: Molineux Street Primary Care Centre, Byker

Friday: Kenton Centre, Hillsview Avenue, Kenton

Contact details:

Psychology in Health Care
Newcastle General Hospital
Westgate Road
Newcastle
NE4 6BE
Tel: 0191 2563031

Opening times:
9.00am – 5.00pm Monday to Thursday
9.00am – 4.00pm Friday

Newcastle Primary Care Mental Health Team

The primary care mental health team is made up of primary care mental health workers and primary care counsellors. They provide services to people suffering from common mental health problems such as anxiety

or depression. Counsellors also see people who require brief psychological services.

Treatment is offered on a one to one basis with the service also providing group sessions for various issues such as:

- anger management
- women's self esteem
- managing depression

Access to the service is via your GP

Contact details

1 The Meadows
Fawdon
Newcastle upon Tyne
NE3 3NA

Tel. 0191 219 6953
Fax. 0191 219 6951

Newcastle PCT Psychology in healthcare

The psychology in health care service works in both hospitals and the community in Newcastle to provide therapy and educational support classes for a wide range of mental health issues related to injury and illness. They also provide support to carers and family members.

The service is organised into three main areas:

1. Health psychology (for adults/children who are experiencing psychological difficulties related to health issues and are being treated within specific departments in Newcastle hospitals).
2. Primary care psychology (provided to adults within community settings, such as clinics)
3. Neuropsychology (for adults and children)

Clinical psychologists work in a variety of health service settings. They provide assessment and psychological intervention to individuals, couples, families and groups. The clinical psychologists in the psychology in healthcare service offer specialist services in the following areas.

1. Health psychology – adults:

- Burns and plastic surgery
- Cancer
- Cardio vascular services
- Chronic fatigue
- Diabetes
- H.I.V.
- Pain management programme
- SWiMS (weight management)

1b. Health psychology – paediatrics (children):

- Cleft lip and palate
- Paediatric (child) burns
- Paediatric oncology (children with cancer)

2. Primary care psychology:

- Anger management classes
- Stress control classes
- 'Beating the Blues' – individual computerised classes for mild depression

3. Neuropsychology – adults and paediatrics

People are generally referred to the service by their GP or by hospital staff.

Northumberland Primary Care Mental Health Workers

The primary mental health worker (PMHW) service is staffed by professionals who have specialist knowledge about child and adolescent mental health (CAMHS). Primary mental health workers help professionals and workers within health and social care services to effectively recognise children and young people's mental health strengths and difficulties. Primary mental health workers act as the contact point between health and social care services and the specialist child and adolescent mental health service.

By providing advice to health and social care services as well as schools and other organisations, primary mental health workers promote a preventative and early intervention approach to emotional health and well being.

The aim is to ensure accessible, responsive interventions for children and families are provided within a non stigmatising environment.

Access to the service

If a health professional or any person working with children has concerns about a child or young person's mental health they can seek advice from a primary mental health worker. The primary mental health worker will then offer advice about how they can support the young person further or alternatively will advise if a referral to specialist CAMHS is appropriate.

Following referral a primary mental health worker will contact the member of staff who made the referral and talk over what emotional issues the child or young person is experiencing as well as what has already been tried to help the child. It may be that some advice on other interventions is sufficient to enable the referrer to continue to work with the child.

Alternatively the primary mental health worker may offer a joint assessment so they can fully understand what is happening in the child's life and develop a care plan which supports them and their family.

In some instances the mental health issues may be such that a referral to the specialist Child and Adolescent Mental Health service is appropriate. However the child, young person and family remain central to the whole process and must give consent for the primary mental health worker to be involved or for further referrals to be made.

Contact details

Primary Mental Health Workers team
Ponteland PCC
Meadowfield estate
Ponteland
NE20 9SD
Tel: 01661 864582/867742

The service operates between 8.30-6pm.

Chapter 6 Counselling Services in North Tyneside delivered by the Voluntary and Community Sector

This information is current as of May 2009

Acorns	
<p>Acorns is for you if you are a young person aged 6-18 years old, live in North Tyneside and are looking for support, help or information about domestic violence and abuse. Acorns also offers support to the adults taking care of children and young people who come to the project for counselling. Referrals can be made directly or by other professionals by telephone or email Counselling is offered free of charge.</p>	
Telephone/Fax	0191 2006302
Email:	admin@acornsproject.org.uk
Web:	www.acornsproject.org.uk
Catchment area: residents of North Tyneside	
Waiting list:	6 weeks

Asian Family Counselling Service

AFCS works with individuals, couples and families, providing a safe environment where problems can be discussed and options explored. All services are provided in Gujarati, Hindi, Urdu, Punjabi and English. AFCS provides a culturally sensitive and completely confidential service where experienced and qualified counsellors provide one to one, couple relationship counselling and family therapy in the major Asian languages. Telephone counselling is available for clients who are unable to get to office for face to face counselling. Referrals can be made directly, or by doctors, social workers, solicitors or religious leaders by telephone, email or by writing to the address below.

Address: Suite 51
Windmill Place
2-4 Windmill Lane
Southall
Middlesex
UB2 4NL

Telephone: 020 8571 3933 or 020 8813 9714

Email: info@asianfamilycounselling.org.uk

Web: www.asianfamilycounselling.org.uk

Catchment area: National working into North Tyneside

Waiting list: 2 weeks

Barnardos The Base Young People's Centre

Offers help and support when a child or young person's future is under threat - be it from homelessness, drugs, sexual abuse, disability, unemployment, prejudice or emotional problems. Counselling is offered free of charge on drug and alcohol use
Contact by telephone, email or in person at the address below.

Address: Barnardos The Base
26 Esplanade
Whitley Bay
NE26 2AJ

Telephone: 0191 2532127

Email: carla.franchi@barnardos.org.uk

Web: www.barnardos.org.uk

Catchment area: North Tyneside

Waiting List: None, drop in to access services

Care Confidential

Choices Pregnancy Advice Centre is a non clinical pregnancy advice centre set up to support women, their families and partners when facing a crisis related to pregnancy, whether that is due to an unplanned pregnancy, post abortion trauma or any other issue related to pregnancy loss. Amongst other services they provide:

Pregnancy crisis counselling

Pre-abortion counselling

Post-abortion counselling

Befriending service

Miscarriage counselling

Baby loss counselling

All services are free and confidential.

Address: 103-107 Whitley Road,
Whitley Bay,
NE26 2ET

Telephone/Fax: 0191 252 20 20

Email: mail@choicespregnancy.org.uk

Web: www.careconfidential.com

Catchment area: National

Waiting list: None

Consumer Credit Counselling Service (CCCS)

CCCS is a registered charity offering free, confidential advice and support to anyone who is worried about debt. They are dedicated to providing confidential, professional counselling and money management assistance to financially distressed families and individuals, regardless of race, creed, colour, sex, social position or financial status. They also aim to foster education on money management and the wise use of credit by consumers.

Debt counselling can be accessed daily 8am - 8pm by calling the freephone helpline where you will speak to a Debt Counsellor.

Helpline: 0800 138 1111

Head Office: Consumer Credit Counselling Service
Wade House
Merrion Centre
Leeds
LS2 8NG

Web: www.cccs.co.uk

Email: contactus@cccs.co.uk

Catchment area: National working into North Tyneside

Waiting List: None, advice accessed by telephone

Coping with Cancer

Coping with Cancer offers support to the cancer community at times when it is most needed, at diagnosis, during treatment and in end of life situations.

Coping with Cancer volunteers, counsellors and complementary therapists can be found in local hospices, in chemotherapy day units in most of the regional hospitals, in support groups and Drop Ins and on the end of a telephone.

They offer a fully independent, confidential and free counselling service available to cancer patients, their families, carers and friends.

They can see clients in the office on the West Road, Newcastle, or book other venues in the city. If the clients are unable to travel they offer a home service. Initial contact by telephone, fax or email

Address: Coping With Cancer North East
Suite 13
391 West Road
Newcastle-Upon-Tyne
NE15 7PY

Telephone: 0191 228 0259

Fax: 0191 228 0223

Email: Pauline.johnson@yahoo.co.uk

Web: www.copingwithcancer.org.uk

Catchment area: North East working into North Tyneside

Waiting List: 48 hours

Cruse Bereavement Care	
Promotes the well-being of bereaved people and to enable anyone bereaved by death to understand their grief and to cope with their loss. Counselling amongst other services is free to bereaved people	
Address:	The St. Gabriel's Centre 2 St. Gabriel's Avenue Heaton NE6 5QN
Telephone/Fax: 0191 2765533	
Email:	rosemary.grey@crusenortheast.org.uk
Web:	www.crusebereavementcare.org.uk
Catchment area: National working into North Tyneside	
Waiting list:	12 weeks

Learning Disabilities Federation (LDF)

LDF offers this unique free confidential counselling service on a one to one basis to people with a learning disability. A small group talking treatment programme can also be arranged. Initial contact can be made by telephone, fax or email

Address: 205 Park Road Wallsend Tyne and Wear NE28 7NL

Telephone: 0191 2001100

Fax: 0191 2001118

Email: learningdisabilities.federation@virgin.net

Catchment area: residents of North Tyneside with a learning disability
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Waiting List: None

LIFE

LIFE provides help and support to thousands of women and men each year. They offer free, confidential information, counselling and support for women contemplating abortion, suffering after pregnancy loss or struggling to cope after abortion. Their trained counsellors and skilled helpers are there to listen, not to judge. They have a nationwide network of care centres, a free national helpline open 6 days a week (0800 915 4600) and a 'text-to-talk' service (0778 620 0330). Their national helpline is staffed by some of their most experienced counsellors. You can call if you have a quick query, or if you want to talk in depth to someone over the phone.

Referrals are made directly or by other professionals.

Address:
(National) LIFE Head Office
LIFE House
1 Mill Street
Leamington Spa
Warwickshire
CV31 1ES

National Helpline: 0800 9154600

Text to Talk service: 0778 6200330

Web: www.lifecharity.org

Email: info@lifecharity.org.uk

Catchment area: National working into North Tyneside

Waiting List: None

Macmillan Cancer Support

Talking to someone can be the first step towards helping you feel better. It can help you cope with the uncertainties that may lie ahead. Macmillan knows just how important those conversations can be. Every year they help thousands of people find someone to talk to. And there are plenty of ways to talk. You can call their helpline for medical, practical and emotional support, or talk to other people affected by cancer in their online communities.

Address: Macmillan Information and Support Centre
Northern Centre for Cancer Care
Freeman Hospital
Newcastle-upon-Tyne
Tyne and Wear
NE7 7DN

Telephone: 0191 213 8611 Newcastle office
0808 808 2020 National helpline

Web: www.macmillan.org.uk

Catchment area: Newcastle working into North Tyneside

Waiting list: None

Mind in North Tyneside

Mind is the leading mental health charity in England and Wales working to create a better life for everyone with experience of mental distress. Amongst other services they provide free counselling. Mind operates an 'open door' policy for those who wish to use their services or contact can be made by telephone, fax or email.

Address: 113 Norfolk Street
North Shields
Tyne and Wear
NE30 1NQ

Telephone: 0191 2576976

Fax: 0191 2587708

Email: mindnorthtyne@btconnect.com

Catchment area: North Tyneside

Waiting List: None

NECA - North East Council on addictions - Project ANSWER

NECA is the largest Regional Charity working in the area of Substance use/misuse. Their remit includes all forms of substance dependency including Illicit Drugs, Alcohol, Prescribed Medication, Over the Counter Preparations, Nicotine, Solvents & Gases and Gambling. Amongst other services Project ANSWER offers free counselling and is open Monday - Friday 9am - 5pm
Referrals can be made directly in person or by telephone

Address: Project ANSWER
Atkinson Terrace
Wallsend
NE28 6RE

Telephone: 0191 2408122

Fax: 0191 2408125

Web: www.neca.co.uk

Catchment area: National working into North Tyneside

Waiting List: None

North Tyneside Carers Centre

Supports informal carers in North Tyneside by offering many services including free counselling

Referrals can be made directly or by professionals. Initial contact can be made by telephone, fax or email.

Address: 3rd Floor
YMCA Building
Church Way
North Shields
NE29 0AB

Telephone: 0191 200 1111

Fax: 0191 2001112

Email: enquiries@ntcarers.co.uk

Web: www.carers.org/ntyneside

Catchment area: North Tyneside

Waiting List: 57 weeks

Northern Initiative on Women & Eating

A free confidential telephone contact point at which people of any age can talk, perhaps for the first time, or when they are feeling distressed, about their use of food and how this makes their lives difficult. There is someone to listen and/or give information about local and national service provision for eating distress and related issues. The telephone line can also be used by supporters, both personal and professional, who are concerned about someone with an eating problem.

Address: NIWE Eating Distress Service,
Unit 5/6,
1 Pink Lane,
Newcastle upon Tyne
NE1 5DW

Telephone: 0191 2210233

Email: niwe@talk21.com

Web: www.niwe.org.uk

Catchment area: Newcastle working into North Tyneside

Waiting List: None

R.E.A.C.H Centre - Rape Examination Advice Counselling & Help

Helps women and men who have been raped or sexually assaulted. Provides forensic medical examinations by gender appropriate doctors within 72 hours of assault. A comprehensive free counselling service is offered to all victims aged 16 or over. Counselling is also provided to those whose first language is not English and R.E.A.C.H uses appropriate interpreters who are now very experienced in this field. Referrals can be made directly or by other professional organisations. Initial contact can be made by telephone, fax or email.

Address: The Rhona Cross Centre
18 Jesmond Road West
Jesmond
NE2 4PQ

Telephone: 0191 2121551

Fax: 0191 2121547

Email: reach@northumbria.pnn.police.uk

Web: www.reachcentres.co.uk

Catchment area: Residents of Tyne and Wear and Northumberland and those visiting or working in the area where the assault has taken place.

Waiting List: None

Relate

Relate provides individual, couple and family counselling services, psychosexual therapy, workshops and lifeskills courses, counselling with young people (from 10 years) therapeutic mediation, consultations and support face to face, by phone and by email. Their services include (amongst others):

- Relationship counselling
- Family counselling
- Young people's counselling
- Psychosexual therapy
- Stress, redundancy, unemployment counselling
- Anxiety and stress, self esteem and self confidence counselling
- Bereavement counselling
- Domestic violence counselling
- Mediation with a counsellor
- Telephone and email counselling
- Counselling in GP surgeries
- Counselling in children's centres
- Counselling in schools

Referrals can be made directly or from other professionals. Initial contact can be made by telephone, fax or email.

Costs may apply, although nobody is turned away based on an ability to pay.

Address: Mea House
Ellison Place
Newcastle upon Tyne
NE1 8XS
Mon - Thur 9am - 9pm
Fri 9am - 5pm
Saturday 10am - 1pm Newcastle Central Walk-In Centre, Unit
5, St James' Gate

Relate counselling is also available at the following GP Surgeries in North Tyneside:

West Farm Surgery, 31 West Farm Ave, Newcastle upon Tyne NE1 8LS
0191 266 2215

Lane End Surgery, 2 Manor Walk, Newcastle upon Tyne, NE7 7X
0191 266 5246

Relate cont.

Forest Hall Health Centre, Station Rd, Forest Hall, Newcastle upon Tyne, NE12 9BQ

0191 259 9666

Woodlands Park Health Centre, Canterbury Way, Wideopen, Newcastle upon Tyne, NE13 6JJ

0191 236 2366

Wellspring Medical Centre, Killingworth Health Centre, Killingworth, Newcastle Upon Tyne, NE12 6HS

0191 266 1728

Nelson Health Centre, Cecil St, North Shields, Tyne and Wear, NE29 0DZ

0191 257 1204

Bewicke Medical Centre, 51 Tynemouth Rd, Wallsend, Tyne and Wear, NE28 0AD

0191 262 3036

Garden Park Surgery, Denbigh Ave, Howdon, Wallsend, Tyne and Wear NE28 0PP

0191 289 2525

69 Park Parade, Whitley Bay, Tyne and Wear, NE26 1DU

0191 252 3135

64 Marine Ave, Whitley Bay, Tyne and Wear, NE26 1NQ

0191 252 5317

45 Marine Ave, Whitley Bay, Tyne and Wear, NE26 1LZ

0191 253 0331

Whitley Bay Health Centre, Whitley Rd, Whitley Bay, Tyne and Wear, NE26 2ND

0191 253 1113

Monkseaton Medical Centre, Cauldwell Lane, Whitley Bay, Tyne and Wear, NE25 9PH

0191 297 9015

Earsdon Rd, Shiremoor, Tyne and Wear, NE27 0HJ

0191 297 9015

The Portugal PI Health Centre, Portugal PI, Wallsend, Tyne and Wear, NE28 6RZ

0191 262 5252

Relate cont.

Telephone: 0191 2329109

Counselling tel. no. 0300 100 1234

Fax: 0191 2697919

Email: enquiries@relate-nt.org.uk

Web: www.relatenorthumberlandandtyneside.org.uk

Catchment area: Northumberland working into North Tyneside

Waiting List: 3 weeks

St Vincent de Paul Society

Aims to relieve poverty in whatever form through direct person to person contact.

Amongst other services they offer free counselling and debt counselling. Referrals can be made directly or received through statutory or voluntary agencies. All requests received will be passed on to the SVP group of volunteers or project nearest to where the person requesting help is based. All cases are considered locally and applicants will be contacted to arrange a visit previous to any assistance being given. Initial contact can be made by telephone

Address: Len Woodley Centre
New Bridge Street
Newcastle upon Tyne
NE1 2TQ

Telephone: 0191 2094051 0191 2616027

Web: www.svp.org.uk

Catchment area: International working into North Tyneside

Waiting List: None except for debt counselling which has a short waiting time

Samaritans

The Samaritans provides confidential non-judgemental emotional support, 24 hours a day for people who are experiencing feelings of distress or despair, including those which could lead to suicide. Services can be accessed free by telephone, email, letter and face to face.

Telephone services can be accessed 24 hours a day or face to face in Jesmond 9am - 9pm

Address: 15 Portland Terrace,
Newcastle Upon Tyne,
Tyne & Wear
NE2 1QQ

Telephone: 0191 232 7272 or 08457 909090 (helpline)

Email: jo@samaritans.org

Web: www.samaritans.org

Catchment: National working into North Tyneside

Waiting List: None

Someone Cares

Someone Cares is a friendly, Newcastle and North East-based free counselling service for victims who have suffered physical, emotional and sexual abuse.

The service is available to both male and females aged between 16 and 80 years of age.

Abuse covers: domestic violence, childhood sexual abuse, rape and sexual assault, prostitution, pornography and torture as it affects victims, survivors and abusers. Initial contact can be accessed by telephone or email

Address: Someone Cares
The Meadows
Waterville Road
North Shields
NE29 6BA

Telephone: 0191 258 4825

Email: mail@someonecares.org.uk.

Web: www.someonecares.org.uk

Catchment area: Newcastle and North East

Waiting List: 2 months

Streetwise

Free confidential advice and support for young people aged 13-25.

Counselling services for:

- Bereavement
- Being bullied
- Abuse
- Relationship difficulties
- Sexuality
- Feeling unhappy or depressed
- Loneliness
- Being stressed out
- Family problems
- Feeling angry
- Eating issues

Young people can self refer or another agency can refer, via telephone or drop-in

Address: 35-37 Groat Market
Bigg Market
Newcastle upon Tyne
NE1 1UQ

Telephone: 0191 2305400

Fax: 0191 2211722

Email: counselling@streetwisenorth.co.uk

Web: www.streetwisenorth.co.uk

Catchment area: Newcastle working into North Tyneside

Waiting List: None

Tyneside Rape Crisis Centre

TRCC offers free counselling, support and information to women over 16 in Tyneside who have been raped, sexually abused, sexually harassed or sexually assaulted. Services offered include:

- Face to face counselling
- Telephone support line

Women can self refer or be referred by a friend, worker or relative with the woman's consent. Initial contact can be made by telephone or email

Address: Rape Crisis Centre
Union Chambers
41 Grainger Street
Newcastle Upon Tyne
Tyne and Wear
NE1 5JE

Telephone Admin: 0191 2220272

Telephone support Line: 0191 2329858

Fax: 0191 2610983

Email: enquiries@tynesidercc.org.uk

Web: www.tynesidercc.org.uk

Catchment area: Newcastle working into North Tyneside

Waiting List: None for telephone service

User Centre Advice Network (UCAN) Women's Group

Provides support and one to one counselling for women aged 16-65 years old with mental health problems who have suffered sexual, physical or emotional abuse
Women can self refer or be referred by other professionals. Initial contact can be made by telephone or email.

Address: The Shiremoor Centre
Earsdon Road
Shiremoor
NE27 0HJ

Telephone: 0191 2518109 or 0791 2991391

Fax: 0191 2518109

Email: faztendy@aol.com

Catchment area: North Tyneside

Waiting list: None

7. Summary

The British Association for Counselling and Psychotherapy (BACP) advises that as a non-statutory profession at present there are no recognised national standards, or policies on counselling. BACP is currently involved in the negotiations to establish statutory regulation within the next two years and it seems likely that the regulatory body will be the Health Professions Council.

BACP has established its own standards by means of the Accreditation standards for individual counsellors/psychotherapists; Counselling and Psychotherapy Training Courses; Supervisors and Trainers.

Skills for Health are working with practitioners, professional organisations and experts to develop National Occupational Standards (NOS) for Psychological Therapies as detailed in the report.

The Government is committed to expanding access to psychological therapies such as counselling and cognitive behavioural therapy as a positive alternative to medication, and The Secretary of State for Health has announced investment in therapy services.

By 2010/11, the NHS will spend £170million per year on psychological therapies, with more than £30million in 2008/9 and more than £100million in 2009/10. This investment will hopefully mean more people will be treated for depression and anxiety with a greatly reduced waiting time.

Access to and information on statutory and voluntary and community counselling services in North Tyneside is included in detail in chapters 5 and 6 of this report.

8. Conclusions

This report is an initial piece of research on availability of counselling provision in North Tyneside. I recommend that the LINK and its members undertake further research to gain evidence to establish the take up of counselling services by Health and Social Care professionals, by self referral or by individuals requesting counselling. This evidence, if possible to obtain, should discover any gaps in provision.

It is recommended that a task group of willing LINK members undertake this research to further develop a response to concerns raised by members of the LINK at earlier consultations.

A number of questions have arisen during this research which could also be further investigated:

- When the course of counselling therapy is complete is it possible to re refer if needed without going to the bottom of the list?
- Is there any direct support counselling for counsellors themselves?
- Are there any specific counsellors for sufferers of ME/CFS/PVFS (Myalgic Encephalopathy/Chronic Fatigue Syndrome/Post Viral Fatigue Syndrome)?
- Will IAPT provide a quicker response to counselling needs?

The information contained in this report will also be evidence for the statutory sector in its ability to construct and commission effective counselling services within North Tyneside.

The Voluntary and Community Sector Counselling Services included in Chapter 6 of this report could prove to be a valuable resource to the public therefore CHCF recommends publishing and distributing this information to GP surgeries, libraries and other community venues across the Borough.

References

Department of Health

Richmond House

79 Whitehall

London SW1A 2NS

Phone: 020 7210 4850

Lines are open from 08:30 to 17:00, Monday to Friday excluding bank holidays.

Skills for Health

2nd Floor

Goldsmiths House

Broad Plain

Bristol BS2 0JP

Telephone: 0117 922 1155

Fax: 0117 925 1800

Email: office@skillsforhealth.org.uk

Website: www.skillsforhealth.org.uk

British Association for Counselling and Psychotherapy

BACP House, 15 St John's Business Park, Lutterworth, Leicestershire
LE17 4HB, United Kingdom

The Registered Office is open Monday-Friday, from 8.45am until 5pm

Telephone:

General Enquiries: 01455 883300

Text: 01455 560606

Email: bacp@bacp.co.uk

Website: www.bacp.co.uk

National Institute for Health and Clinical Excellence

MidCity Place

71 High Holborn

London

WC1V 6NA

Telephone: 0845 003 7780

Fax: 0845 003 7784

Email: nice@nice.org.uk

Website: <http://www.nice.org.uk/>

Research Centre for Learning and Teaching

School of Education, Communication and Language Sciences,

Newcastle University, Newcastle upon Tyne

NE1 7RU

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