CAMBRIDGESHIRE CONSULTANCY IN COUNSELLING

Information Governance Procedures for CCC

The principle of providing a confidential service in which people feel safe enough to make good use of the counselling, added to the need to act responsibly concerning people's safety, and the need to comply with the GDPR, Data Protection Act and other legal requirements, means that it is important to be clear about what information we write down, where it is kept, who has access to it, and what may be done with it.

All counsellors must adhere to these procedures.

This document includes:

1. **Records management procedures** that set out how records will be created, used, stored and disposed of;
2. **Access control procedures** that set out how we will control access to computer-based information systems;
3. **Information handling procedures** that set out how we will transfer information safely and securely;
4. **Incident management procedures** that set out how we will manage and report information incidents;
5. **Business continuity procedures** that set out how we will support service delivery in the event of a system failure or other disaster.

1. Records management procedures

Written records of type A will be kept for 7 years then destroyed.

Type A: Service Record including initial assessment details
Information kept to show we have carried out our duty of care and that can be given to another CCC counsellor if the client wishes to change counsellor or the counsellor becomes unavailable:
CCC require a 'service record' to be kept for CCC clients. The 'service record' is to be distinguished from 'process notes' and should include:-

- The Client Contract
- Client Information
- Initial assessment record
- On-going Service record
- Concluding assessment

The 'Contract' and contracting procedure
This dialogue is about the terms and conditions of the counselling service to be agreed with the client. Issues relating to confidentiality and exemptions from confidentiality must be made explicit and included in the client's file. For example:

- The counsellor works with a supervisor with whom confidential information is discussed
- How the client can be contacted with attention to whether messages can be left must be discussed.

- A brief summary of the privacy policy and why we keep notes, how we keep them and they can request a copy.

(See CCC 'Contract'). The client should sign and receive a copy of the contract the other making up part of the client file. At the initial session the client should be offered the privacy policy to read and keep and made aware that it is on the website.

The initial assessment record
This includes:

- agreeing how the client prefers to be contacted and issues relating to messages and confidentiality
- DOB
- GP name and address
- medical and psychiatric history
- biographical details
- current situation
- presenting problem
- reason for the referral
- why now?
- client's view of area to be explored/worked
- risk assessment.

On-going service record
This includes:

- Date of referral
- dates of sessions in chronological order
- Dates of any contacts between sessions and a brief reason
- Duration of session and the location if it varies:
- Late attendance:
- Brief factual summary of significant issues raised by the client:
  NB: Ensure information is factually accurate: not misleading or open to interpretation. The 3rd and 4th principle enshrined in the Data Protection Act emphasises that records should be "adequate, relevant and not excessive". They must be "accurate and, where necessary, kept up to date": Include positive attitudes as well negative including attachment figures:
- Changes in client circumstances and states of mind, for example depression, suicidal thoughts
- Therapist's responses, for example, advice, guidance, 'homework'.
- Records of consultations with others, for example, Supervisor, Co-ordinator of Counselling
  NB: Date that recording was made which may be different to the date of the contact.
- Record of cancelled sessions or those not attended without client contact.

If any element of the service record is stored electronically then this must be on devices that are password protected, and in files that are further password protected and only accessible by the counsellor. Personal information that is stored physically using paper records must be held securely in locked storage only accessible by the counsellor and their Therapeutic Will Executor should the counsellor become incapacitated.

This information must be stored securely for 7 years then destroyed. If the counsellor leaves CCC during this time or has their membership cancelled then they must hand their client service record over to the Counselling Co-ordinator. It should also be in a counsellor's

therapeutic will that their executor should hand the Counselling Co-ordinator their CCC service records.

Type B: Counsellors' process notes:
Details of personal information gained from sessions, any comments by the counsellor on the feelings (e.g. of counter-transference in the session), and on the progress of the counselling, must be kept safely by the counsellor WITH NO IDENTIFYING NAME, INITIALS, OR OTHER DETAILS. These will be the notes the counsellor makes after sessions and takes to supervision. These notes will travel with the counsellor and must be kept securely in the counsellor's own homes in a designated safe haven. These notes are personal to the counsellor and must be destroyed within a month or once no longer needed.

Type C: Contact details:
Counsellors at CCC may contact clients via email, phone or SMS text message to communicate session arrangements e.g. cancellation. Counsellors should not store client's phone numbers under the client's name in their phone. Emails should not include details about the sessions and counsellors must endeavour to keep their email secure e.g. not sharing their password.

Type D: Publication of Case Material
If any counsellor wishes to write an account of the work at CCC for publication or for training purposes, then permission must first be sought from the Counselling Co-ordinator to ensure all ethical and information governance considerations are taken into account. Extreme care must be taken to disguise details that would in any way identify individuals. Informed written consent must be obtained from each person who may be written about for publication. If a client declines consent then this must not effect in any way their treatment by the service.

2. Access control procedures

Any client notes or records stored on electronic devices must be on password protected devices and in password protected files only accessible by the counsellor and their therapeutic executer. On PCs or laptops system and software updates must be kept up to date along with up to date anti-virus software.

3. Information Handling Procedures

All communication online about clients e.g. query to the Counselling Co-ordinator, must be done in a way not to identify the client in question. Counsellors personal email accounts cannot be treated as secure and client information or contact details should not be sent this way. Whatsapp or SMS may be used by the allocations manager if a telephone call is not possible. Counsellors must delete after reading any SMS that contain sensitive information.

CCC uses standard e-mail contact for passing on information about meetings and talks but this must only be used for such non-secure communications. Standard email should never include anything that might identify clients or client contact details.

Where a counsellor has to pass notes to another counsellor e.g. in the case of a client switching counsellors, this must be done by hand or tracked post marked 'private and confidential'.

If information needs to be passed to a third party organisation such as the client's GP then this must only be done with permission from the Counselling Co-ordinator and the client's

consent. If the counsellor is concerned about patient safety, the Counselling Co-ordinator should be informed by telephone. If a piece of written communication is required then this must be from the Counselling Co-ordinator and marked 'private and confidential'.

Should notes have to leave the safe haven and be transported e.g. to supervision, then notes should be double bagged and ideally be in a locked container.

4. Incident Management Procedures

Any potential breach of confidentiality or information management incident must be reported to the Data Protection Officer who will investigate and take appropriate action. The Data Protection Officer will complete an incident form and further training and monitoring will be undertaken if required. In the case of gross misconduct disciplinary action will be taken and membership may be terminated. The Data Protection Officer will determine the severity of the breach and if there is a need to inform the NHS Commissioner and/or the Information Commissioner.

5. Business continuity procedures

Counsellors are required to have a therapeutic will approved by the Counselling Co-ordinator or membership secretary.

Should there be a fire or other incident that destroys the paper record at a counsellor's locked storage then effort should be made to recreate any key notes from memory.

Approving individual	**Kirstin Bicknell**
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