

National Quality Standards for the Provision of Suicide Bereavement Services

A Practical Resource

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Prepared by Console, the National Office for Suicide Prevention and Turas Le Chéile.
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Foreword

The time after a death by suicide is an extraordinarily difficult time for those bereaved. People need to be supported in many different ways. *Reach Out* (2005), the national strategy for suicide prevention, recognises the role of voluntary agencies in supporting the bereaved, nationally and locally. In 2006 the National Office for Suicide Prevention commissioned Petrus Consulting to review the bereavement support services available in Ireland. The report published by Petrus Consulting (2008) identified the need for standards to be set for the provision of bereavement support services. Four levels of support service have been identified, ranging from information provision at level 1, to mainstream professional psychotherapeutic and mental health services at level 4.

Following the Petrus report, Console was commissioned to develop a quality framework for the delivery of services by organisations to those bereaved by suicide in Ireland. This initiative addresses Action 23.2 in *Reach Out*: “...develop standardised bereavement support services ensuring the registration, training, supervision and support of bereavement counsellors providing such services”. Turas le Chéile, a local bereavement support service based in Co Kildare, collaborated with Console in developing and testing the standards within their organisation.

The resulting document sets out the standards by which all organisations can be measured. It is not expected that organisations will meet all of the

standards from the outset, but it is expected that they will aim to achieve these standards within a reasonable timeframe. This document will be an invaluable resource to new organisations which are just setting up, and established organisations which are ready to reflect on their achievements to date and set their goals for the future.

This document represents a significant resource for those organisations providing support at a very vulnerable time in any individual's life, following a death by suicide. It provides us with the national quality standards for bereavement support services. The next step for us now is to develop national standardised training in bereavement support. This will commence in 2012.

I would like to sincerely thank Ciaran Austin, from Console, who chaired the Steering Committee, and all those who have contributed to the process of putting these standards together. I am very grateful to Turas le Chéile who gave of their time to collaborate with this project and allowed the standards to be piloted within their organisation. The collaboration between these two organisations, one national, one local, was pivotal to the project.

Catherine Brogan
Acting Director
National Office for Suicide Prevention

Overview

Background

What is this document and who should use it?

Suicide is sadly all too prevalent in Ireland today. The loss of a loved one to suicide is devastating.

Those left behind suffer a very specific type of bereavement, involving guilt, anger and bewilderment and may even be at increased risk of suicide themselves. To this end, suicide-specific bereavement services are essential and this document has been developed to support individuals and groups who operate or plan to operate suicide bereavement services in Ireland. They may provide, or intend to provide a dedicated and specific suicide bereavement service or as part of their wider range of services. In either case, this document relates to the training and resources which must be place for the provision of any suicide bereavement service or activities.

This document sets out crucial national standards for all levels of suicide bereavement support service in Ireland. This document should be used by services or organisations to examine, improve and validate the services they provide. It shows you how to identify which standards apply to your service / organisation and helps you assess what action needs to be implemented to put these standards in place. The document and standards which follow relate directly to the area of suicide bereavement

support and services; they do not take into account other requirements and needs of specific groups or minorities, including those of children. In such cases, the service / organisation should always adhere to all other existing standards which apply to their specific area(s) of work and ensure they keep up-to-date with new legislation or standards.

These standards were developed by the National Office for Suicide Prevention based on the *Review of General Bereavement Support and Specific Services Available Following Suicide Bereavement*(2008) which was conducted by Petrus Consulting. These standards were compiled together with Console, the national agency providing supports and services for those bereaved by suicide in Ireland and Turas Le Chéile bereavement support services, providing support to those bereaved including those bereaved through suicide.

This document will be reviewed in January 2014.

Objectives of this programme:

1. To develop national standards for organisations and groups to deliver services to people bereaved through suicide in Ireland (relating to the levels of service set out in the Petrus report)
2. To test these standards within Console and Turas Le Chéile
3. Draw on available national/international best practice and evidence and existing research and proposals
4. Liaise with the International Association for Suicide Prevention sub group on postvention.

Steering Group

The membership of the Steering Group provided representation of the main stakeholders, including the National Office for Suicide Prevention, and two agencies, Console and Turas Le Chéile who formed an Implementation Team which then tested and reported on the framework guidelines throughout the process.

Steering Group

Ciarán Austin, Chair (Console)

Anne Callanan (National Office for Suicide Prevention)

Catherine Brogan (Turas Le Chéile)

Paul Kelly (Console)

Contributors

Daniel Cleary (Console, Project Manager for Implementation Team)

John Hynes (Turas Le Chéile)

Sean McCarthy (Resource Officer for Suicide Prevention)

Teresa McGuire (Turas Le Chéile)

George Brogan (Turas Le Chéile)

Margaret Tierney (Console)

Ciaran Tighe (Console)

Emily Cox (Console)

Steering Group

Terms of Reference

The overall responsibility of the Steering Group was to support the Implementation Team so that the framework document could be tested and implemented.

Terms of Reference

- Invite a second bereavement support service to engage in the testing and implementation of the framework document.
- Agree a template to be used by the Implementation Team to structure the report documenting the testing and implementation of the framework document.
- Comment on the reports from the Implementation Team and address any problems identified in the reports.
- Support the Implementation Team to keep to the proposed schedule.
- Comment on the draft final report .
- Revise the framework document based on the learning from the project.
- Submit the final report to the National Office for Suicide Prevention.
- Submit the framework document to the National Office for Suicide Prevention.

How to Use This Document

How to Use This Document

1. The Guiding Principles for suicide bereavement support services / organisations are set out on page 7 and every service / organisation providing, or intending to provide suicide bereavement services should subscribe to these.

2. It is important that you have a clear understanding of the service level you provide or intend to provide in order to identify the standards that apply to your service / organisation. The Petrus report on suicide bereavement services sets out 4 different levels of suicide bereavement services that a group or organisation can provide and identifies appropriate standards for each level. To understand which standards apply to your service / organisation, see page 10 where each level (1-4) is outlined and explained.

3. Once you have identified which service level applies to your group (1, 2, 3 or 4), you should then turn to the standards section of this document and examine the standards that your service / organisation should be complying to. The service / organisation should then assess whether it complies with these standards. There may be a number of standards that your service / organisation does not currently comply with. To help you to assess what action is needed to implement each

standard, there are helpful examples for each. Completing these tables will establish what actions your service / organisation needs to take and the resources required to implement the relevant standards. This will then ensure your service meets with good practice standards and also meets the needs of the suicide bereaved in an appropriate and effective manner.

4. The information you compile will provide crucial learning relevant for the future development of your service / organisation. Care should be taken to prioritise such planning within your organisation's own strategy and objectives. For guidance on how to complete the Standards from a self-assessment point of view, see page 13.

All standards detailed in this document, represent a minimum requirement or recommendation. There may be a need for services / organisations to subscribe to enhanced or additional standards dependent on their status and remit.

From this point on, you are provided with space to record notes, answers or comments on the current status or development needs of your service / organisation. You are advised to photocopy these pages if you are using a hard copy of this document.

How to Use This Document

Guiding Principles

These Guiding Principles reflect strong core values that should underpin all services provided for those bereaved by suicide. Services / organisations should, at all times;

1. Ensure they “do no harm” to those who come to them for support
2. Ensure the needs of the person(s) bereaved by suicide are central to the service / organisation
3. Ensure the self-care needs and welfare of staff, service providers or support personnel involved with the service / organisation are an important aspect of service governance
4. Deliver services in an appropriate, safe and helpful manner and environment
5. Provide services that are readily accessible to those bereaved by suicide
6. Commit to providing sustainable, consistent and continuous services for the person(s) bereaved by suicide
7. Promote inclusivity and equality in all dealings with the person(s) bereaved by suicide
8. Acknowledge that there is a collective responsibility in supporting those bereaved by suicide and draw on and collaborate with communities and other agencies where possible to affect change
9. Recognise the preventative value of sound suicide postvention practices
10. Commit to the continuous training, improvement of their services and adhere to best practice standards.

All of the service's / organisation's decisions and plans should be underpinned by these Guiding Principles. It can be particularly helpful to refer to these Guiding Principles when faced with difficult decisions.

Q. Does your service / organisation subscribe to these Guiding Principles and and reflect these core values?

Consider:

1. How can the service / organisation demonstrate such compliance?

2. What does the service / organisation need to change to reflect these core values?

3. How does the service /organisation communicate these Guiding Principles to its members, workers and service users?

4. Does your service /organisation have additional guiding principles to add to this list?

Signed _____

Position _____

Date _____

How to Use This Document

Service Levels

The range of bereavement support services varies greatly from providing professional one-to-one psychotherapy services, to organising community support services, to supplying people with printed information. Services /organisations may also vary greatly in size, complexity and in terms of resources available. This document divides these different types of support into 4 categories or levels as defined in international practice. Each level has specific standards. All four levels of organisation play an essential role in supporting those bereaved by suicide.

Before proceeding to the Standards section in this document, please study the following diagram to identify which service level applies to your service / organisation.

Please note in some cases more than one service level may apply to your service /organisation. In such cases, the Guidelines for each of those levels need to be applied.

(Please refer to diagram overleaf...)



| | Service Level | Examples of Services (varied mediums for example, face to face, groups, online, outreach, residential) |
|--|---------------------------|--|
| | 4 Psychotherapy | <p>Typically, psychotherapy would be delivered by an accredited professional availing of clinical supervision and may be provided privately or from within an organisations portfolio of services. “Psychotherapy” refers to the practice of focusing on historical emotional problems, thought processes and the foundations of the problem. It is a longer-term process and suited to those who have cumulative psychological problems over a long time period. Specifically, psychotherapy is delivered in a one-to-one format and could be provided privately, from within an organisation, mental health or primary care service.</p> <p>The bereavement response requiring support at this level represents a complicated reaction to grief.</p> |
| | 3 Counselling | <p>Typically, counselling services would be delivered by an accredited Counsellor availing of clinical supervision and may be provided privately or from within an organisations portfolio of services. “Counselling” refers to the practice of focusing on situations and symptoms to generate direction and find resolutions. It is a short-term process which encourages behavioural changes. Counselling may be delivered one-to-one, in groups or on the telephone/online.</p> <p>This level of service provision is generally required by those who are experiencing a severe reaction to their bereavement.</p> |
| | 2 Support | <p>Support can be delivered in many different formats and within varied capacities;</p> <ul style="list-style-type: none"> • Support services - delivered by trained bereavement support personnel providing one on one, family, group or child support. • Support groups - support groups are most likely to be closed, facilitated by trained group support personnel and follow a time-determined programme. • Self-help groups - self-help suicide bereavement groups do not follow a structured timed programme. These groups are focused on decreasing isolation and fostering a supportive peer network. They generally have open membership and content is determined by common needs and shared experiences. • Listening helplines – these helplines provide non-directive emotional listening support. • Community support – the provision of practical and emotional support through informal contact, befriending and community liaisons. Often contact will be from peers and may be one-to-one, with families or in the home. • Educational support – programmes or training delivered to those bereaved by suicide or those wishing to support the bereaved. <p>This level of service provision is generally useful to those experiencing a moderate reaction to their bereavement</p> |
| | 1 Information | <p>The provision of information may involve the dissemination of literature, directories and resources for those bereaved by suicide, or those wishing to support the bereaved. It may include the use or production of leaflets, posters, books, booklets, factsheets or information websites at related venues, information centres, through the internet or similar channels. Remembrance events and community awareness events may also serve as information services.</p> <p>This service level is sufficient for most who experience a normal or mild level of distress following a bereavement.</p> |

Q. Does your service/organisation have a clear understanding of the Service Level(s) it operates, or intends to operate at?

Indicate the service level here.

1. ☐

2. ☐

3. ☐

4. ☐

Consider:

1. What are your service/organisations service aims and objectives?

2. What specific needs of those bereaved by suicide will/does your service/ organisation meet?

3. Why does your service/organisation provide or intend to provide such services?

4. Who are your services aimed at?

5. Where are the services delivered or where will they be delivered?

6. What other relevant services/organisations are available to those in this geographical area?

7. How are your services delivered, or how will they be delivered?

8. What level of skills do your staff/workers/support personnel have or will require?

9. What training are they provided with, or will they be provided with?

10. What levels of distress will/do your staff/workers / support personnel encounter in their work?

11. How are they supported or how will they be supported?

Signed _____

Position _____

Date _____


How to Use This Document

Self Assessment

How your service /organisation should use these Standards:

Once you have identified the Service Level(s) (1-4) at which your service / organisation operates, you should carry out an assessment of your service.

- The Standards that follow are divided into four sections (Standards Level 1, Standards Level 2, Standards Level 3 and Standards Level 4).
- Refer to the Standards section that corresponds to your service level. It is possible that your service / organisation provides support at more than one level. If so, complete the assessment for each respective level individually.
- Note, each standard has examples of policies or practices that indicate how a service / organisation may develop compliance with that standard.
- A Summary Sheet for each service level is available to photocopy and track how your service / organisation has assessed and reviewed each standard.
- Separate sections follow that allow a more detailed assessment of each standard and how it relates to your service / organisation.
- Photocopied and completed at regular review times, these will serve as a progressive record of how your service/organisation develops towards or in line with best practice. It is recommended that this record is treated as a living document, which should be reviewed as follows;
 - ♦ In their first six months, new services/ organisations should audit their compliance with these standards on-going, log changes and developments, and set document review dates at least monthly.
 - ♦ Existing services/organisations should endeavour to review their compliance and conduct regular reviews at least annually.



Standards Applicable
To Organisations Providing

Level 1

Information Services

Standards Applicable To Organisations Providing Level 1 Information Services – Summary Sheet

| | | | | | | | | | | | | |
|------------------------|--|--------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-------------------|
| STANDARD 1.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 16 | | | | | | | | | | | |
| STANDARD 1.2 | All information provided is accurate, timely and legitimate | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 17 | | | | | | | | | | | |
| STANDARD 1.3 | The mediums used follow other best practice standards | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 18 | | | | | | | | | | | |
| STANDARD 1.4 | The organisation works collaboratively with others | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 19 | | | | | | | | | | | |
| STANDARD 1.5 | The organisation/service safely refers those outside it's remit, to other agencies | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 20 | | | | | | | | | | | |

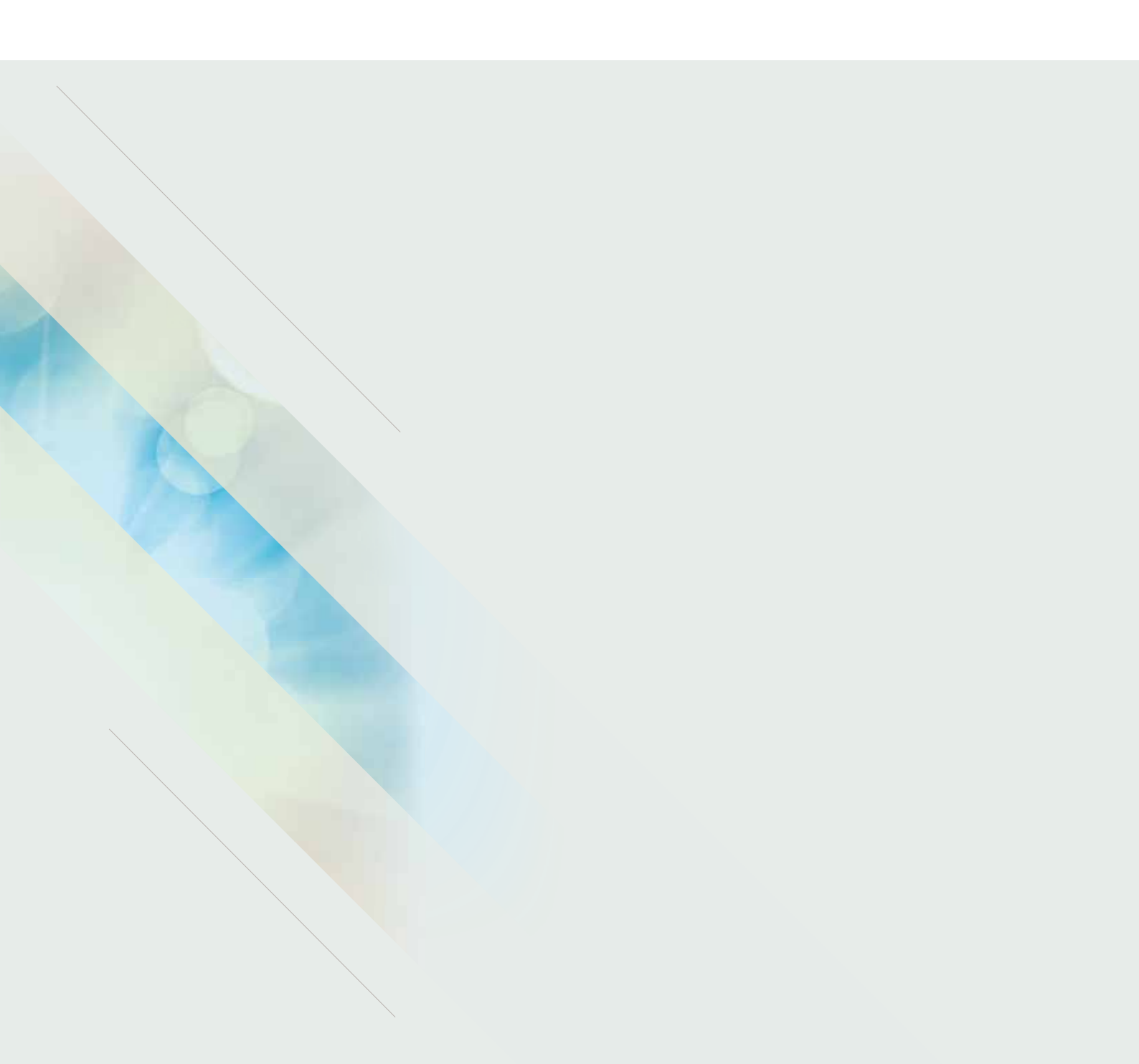
| Standards Applicable to Organisations Providing Level 1 Information Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 1.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | |
| Examples <ul style="list-style-type: none">• Incorporation of the Guiding Principles into the service/organisations stated aims and objectives.• The organisation has clear protocols in place to ensure each of the Guiding Principles are met. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 1 Information Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 1.2 | All information provided is accurate, timely and legitimate | | | |
| Examples <ul style="list-style-type: none">• Information comes from tested and legitimate sources.• Information and resources are reviewed regularly to ensure they are up-to-date and in line with current evidence.• Signposting and referrals are to approved bodies and services.• Delivery of information is by appropriately trained personnel. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 1 Information Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 1.3 | The mediums used follow other best practice standards | | | |
| Examples <ul style="list-style-type: none">• Delivery of information online or through websites is to best practice standards and guidelines in the field.• Language used in written materials is of appropriate recognised standard and is accessible and inclusive. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 1 Information Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 1.4 | The organisation works collaboratively with others | | | |
| Examples <ul style="list-style-type: none">• Other relevant services, agencies and bodies are consulted (see Appendix 3 for suggestions of who to consult with)• Existing information services are reviewed to assess need and avoid overlap. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 1 Information Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 1.5 | The organisation/service safely refers those outside it's remit, to other agencies | | | |
| Examples <ul style="list-style-type: none">• Clear profile in place of those targeted by or suited to service.• Efficient and appropriate referral pathways in place for those who present with more specific needs, or at risk. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |



Standards Applicable
To Organisations Providing

Level 2

Support Services

Standards Applicable To Organisations Providing Level 2 Support Services – Summary Sheet

| | | | | | | | | | | | | |
|-------------------------|--|-----------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|----------------|
| STANDARD 2.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 24 | | | | | | | | | | | |
| STANDARD 2.2 | All information provided is accurate, timely and legitimate | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 25 | | | | | | | | | | | |
| STANDARD 2.3 | The mediums used follow other best practice standards | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 26 | | | | | | | | | | | |
| STANDARD 2.4 | The organisation works collaboratively with others | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 27 | | | | | | | | | | | |
| STANDARD 2.5 | The organisation/service safely refers those outside it's remit, to other agencies | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 28 | | | | | | | | | | | |
| STANDARD 2.6 | Education & awareness programmes are appropriate | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 29 | | | | | | | | | | | |
| STANDARD 2.7 | Service policies and procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 30 | | | | | | | | | | | |
| STANDARD 2.8 | Organisational policies and procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 31 | | | | | | | | | | | |
| STANDARD 2.9 | Appropriate recruitment and selections procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 32 | | | | | | | | | | | |
| STANDARD 2.10 | Staff and support personnel are appropriately supported | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 33 | | | | | | | | | | | |
| STANDARD 2.11 | Appropriate training & development procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 34 | | | | | | | | | | | |
| STANDARD 2.12 | Services are measured | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 35 | | | | | | | | | | | |

| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | |
| <p>Examples</p> <ul style="list-style-type: none">• Incorporation of the Guiding Principles into the service/organisations stated aims and objectives.• The organisation has clear protocols in place to ensure each of the Guiding Principles are met. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.2 | All information provided is accurate, timely and legitimate | | | |
| Examples <ul style="list-style-type: none">• Information comes from tested and legitimate sources.• Information and resources are reviewed regularly to ensure they are up-to-date and in line with current evidence.• Signposting and referrals are to approved bodies and services.• Delivery of information is by appropriately trained personnel. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.3 | The mediums used follow other best practice standards | | | |
| Examples <ul style="list-style-type: none">• Delivery of information online or through websites is to best practice standards and guidelines in the field.• Language used in written materials is of appropriate recognised standard and is accessible and inclusive. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.4 | The organisation works collaboratively with others | | | |
| Examples <ul style="list-style-type: none">• Other relevant services, agencies and bodies are consulted (see Appendix 3 for suggestions).• Existing services are reviewed to assess need and avoid overlap. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 2.5 | The organisation/service safely refers those outside it's remit, to other agencies | | | |
| Examples <ul style="list-style-type: none">• Clear profile in place of those targeted by or suited to service.• Efficient and appropriate referral pathways in place for those who present with more specific needs, or at risk. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.6 | Education & awareness programmes are appropriate | | | |
| Examples <ul style="list-style-type: none">• Duplication of existing programmes is avoided.• Programmes are developed and offered after consultation with relevant associated bodies.• Programmes are evidence-based.• Programmes are incorporated with or complement existing mental health programmes.• Training programmes are delivered by appropriately trained trainers. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.7 | Service policies and procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Clear service objectives and targets.• Critical Incidents policy, Service operating protocols.• Child protection policy, Confidentiality commitment, Limitations to confidentiality.• Data protection statement.• Risk assessment protocols.• Review dates are used for all service policy and procedural documents. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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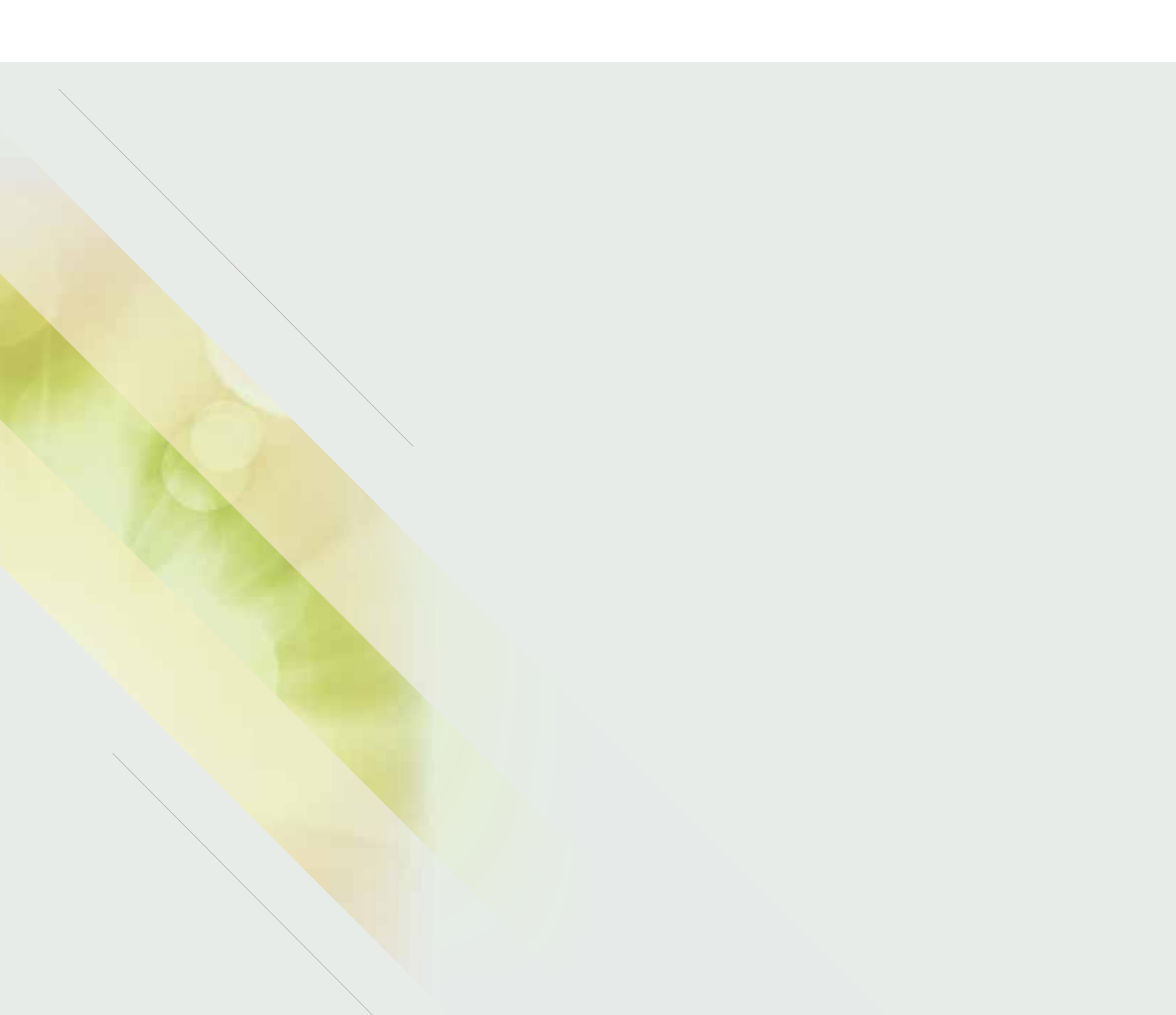
| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 2.8 | Organisational policies and procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Code of Governance, Written Constitution.• Health & Safety statement, Lone worker policy.• Defined mission statement, Stated aims and objectives.• Charitable status (if applicable). | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 2.9 | Appropriate recruitment and selections procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Equal opportunities policy.• Application form and interview assessment procedures, Defined people specifications and requirements.• Reference checking procedures and Garda vetting.• Job descriptions, agreements, contracts in place.• Induction schedules and programmes. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 2.10 | Staff and support personnel are appropriately supported | | | |
| Examples <ul style="list-style-type: none">• Clinical Supervision where appropriate• Peer Supervision and de-briefing are in place for staff and support personnel.• Internal communication processes.• Staff handbook and/or volunteer policy (including probation details, performance reviewing, communication policies, time and attendance details, lone working policy, leave and absence policies, grievance and disciplinary procedures etc). | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 2.11 | Appropriate training & development procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Appraisal and review procedures, Training plans and records.• Defined roles and responsibilities, Opportunities to upskill and network.• Opportunities to avail of additional training as and when available and appropriate.• Training accessed/used is recognised or fits in to the National Framework of Qualifications. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 2 Support Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 2.12 | Services are measured | | | |
| Examples <ul style="list-style-type: none">• Service evaluation reports and processes in place.• Process, impact and outcome evaluations in place.• Complaints procedure.• Feedback forms or similar mechanisms. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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Standards Applicable
To Organisations Providing

Level 3

Counselling Services

Standards Applicable To Organisations Providing Level 3 Counselling Services – Summary Sheet

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|-------------------------|--|--------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-------------------|
| STANDARD 3.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 38 | | | | | | | | | | | |
| STANDARD 3.2 | The mediums used follow other best practice standards | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 39 | | | | | | | | | | | |
| STANDARD 3.3 | The organisation works collaboratively with others | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 40 | | | | | | | | | | | |
| STANDARD 3.4 | The organisation/service safely refers those outside it's remit, to other agencies | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 41 | | | | | | | | | | | |
| STANDARD 3.5 | Service policies and procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 42 | | | | | | | | | | | |
| STANDARD 3.6 | Organisational policies and procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 43 | | | | | | | | | | | |
| STANDARD 3.7 | Appropriate recruitment and selections procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 44 | | | | | | | | | | | |
| STANDARD 3.8 | Staff and support personnel are appropriately supported | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 45 | | | | | | | | | | | |
| STANDARD 3.9 | Appropriate training & development procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 46 | | | | | | | | | | | |
| STANDARD 3.10 | Services are measured | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 47 | | | | | | | | | | | |

| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 3.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | |
| <p>Examples</p> <ul style="list-style-type: none">• Incorporation of the Guiding Principles into the service/organisations stated aims and objectives.• The organisation has clear protocols in place to ensure each of the Guiding Principles are met. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 3.2 | The mediums used follow other best practice standards | | | |
| Examples <ul style="list-style-type: none">• Other relevant services, agencies and bodies are consulted.• Existing services are reviewed to assess need and avoid overlap. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 3.3 | The organisation works collaboratively with others | | | |
| Examples <ul style="list-style-type: none">• Delivery of information online or through websites is to best practice standards and guidelines in the field.• Language used in written materials is of appropriate recognised standard and is accessible and inclusive. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 3.4 | The organisation/service safely refers those outside it's remit, to other agencies | | | |
| Examples <ul style="list-style-type: none">• Clear profile in place of those targeted by or suited to service.• Efficient and appropriate referral pathways in place for those who present with more specific needs, or at risk. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 3.5 | Service policies and procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Operating code of ethics.• Clear service objectives and targets.• Critical Incidents policy, Service operating protocols.• Child protection policy, Confidentiality commitment, Limitations to confidentiality.• Disclosure and consent protocols, Data protection statement.• Risk assessment protocols.• Review dates are used for all service policy and procedural documents. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 3.6 | Organisational policies and procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Code of Governance, Written Constitution.• Health & Safety statement, Lone worker policy.• Defined mission statement, Stated aims and objectives.• Charitable status (if applicable) | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 3.7 | Appropriate recruitment and selections procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Equal opportunities policy.• Application form and interview assessment procedures.• Defined people specifications and requirements including accreditations, qualifications, training.• Reference checking procedures and Garda vetting.• Job descriptions, agreements, contracts in place.• Induction schedules and programmes. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 3.8 | Staff and support personnel are appropriately supported | | | |
| Examples <ul style="list-style-type: none">• Clinical supervision provided.• Peer Supervision and de-briefing are in place for staff and support personnel.• Internal communication processes.• Staff handbook and/or volunteer policy (including probation details, performance reviewing, communication policies, time and attendance details, lone working policy, leave and absence policies, grievance and disciplinary procedures etc). | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 3.9 | Appropriate training & development procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Appraisal and review procedures, Training plans and records.• Defined roles and responsibilities, Opportunities to upskill and network.• Opportunities to avail of additional training as and when available and appropriate.• Opportunities for continued professional development.• Training accessed/used is recognised or fits in to the National Framework of Qualifications. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 3 Counselling Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 3.10 | Services are measured | | | |
| Examples <ul style="list-style-type: none">• Service evaluation reports and processes in place.• Process, impact and outcome evaluations in place.• Complaints procedure.• Feedback forms or similar mechanisms. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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Standards Applicable
To Organisations Providing

Level 4

Psychotherapy Services

Standards Applicable To Organisations Providing Level 4 Psychotherapy Services – Summary Sheet

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|------------------------|--|--------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-------------------|
| STANDARD 4.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 50 | | | | | | | | | | | |
| STANDARD 4.2 | The organisation works collaboratively with others | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 51 | | | | | | | | | | | |
| STANDARD 4.3 | The organisation/service safely refers those outside it's remit, to other agencies | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 52 | | | | | | | | | | | |
| STANDARD 4.4 | Service policies and procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 53 | | | | | | | | | | | |
| STANDARD 4.5 | Organisational policies and procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 54 | | | | | | | | | | | |
| STANDARD 4.6 | Appropriate recruitment and selections procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 55 | | | | | | | | | | | |
| STANDARD 4.7 | Staff and support personnel are appropriately supported | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 56 | | | | | | | | | | | |
| STANDARD 4.8 | Appropriate training & development procedures are in place | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 57 | | | | | | | | | | | |
| STANDARD 4.9 | Services are measured | | | | | | | | | | | |
| | PAGE | ASSESSMENT DATE | REVIEW DATE 1 | REVIEW DATE 2 | REVIEW DATE 3 | REVIEW DATE 4 | REVIEW DATE 5 | REVIEW DATE 6 | REVIEW DATE 7 | REVIEW DATE 8 | REVIEW DATE 9 | REVIEW DATE 10 |
| | 58 | | | | | | | | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 4.1 | The service/organisation subscribes to the Guiding Principles as detailed in this document | | | |
| <p>Examples</p> <ul style="list-style-type: none">• Incorporation of the Guiding Principles into the service/organisations stated aims and objectives.• The organisation has clear protocols in place to ensure each of the Guiding Principles are met. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 4.2 | The organisation works collaboratively with others | | | |
| Examples <ul style="list-style-type: none">• Other relevant services, agencies and bodies are consulted.• Existing services are reviewed to assess need and avoid overlap. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 4.3 | The organisation/service safely refers those outside it's remit, to other agencies | | | |
| Examples <ul style="list-style-type: none">• Clear profile in place of those targeted by or suited to service.• Efficient and appropriate referral pathways in place for those who present with more specific needs, or at risk. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
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| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 4.4 | Service policies and procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Operating code of ethics.• Clear service objectives and targets.• Critical Incidents policy, Service operating protocols.• Child protection policy, Confidentiality commitment, Limitations to confidentiality.• Disclosure and consent protocols, Data protection statement.• Risk assessment protocols.• Review dates are used for all service policy and procedural documents. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
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| What remains to be done in this area? | | | | |
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| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 4.5 | Organisational policies and procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Code of Governance, Written Constitution.• Health & Safety statement, Lone worker policy.• Defined mission statement, Stated aims and objectives.• Charitable status (if applicable). | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 4.6 | Appropriate recruitment and selections procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Equal opportunities policy.• Application form and interview assessment procedures.• Defined people specifications and requirements including accreditations, qualifications, training.• Reference checking procedures and Garda vetting.• Job descriptions, agreements, contracts in place.• Induction schedules and programmes. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|---|---|----------|-----------------|-------------|
| Standard 4.7 | Staff and support personnel are appropriately supported | | | |
| Examples <ul style="list-style-type: none">• Clinical supervision provided.• Peer Supervision and de-briefing are in place for staff and support personnel.• Internal communication processes.• Staff handbook and/or volunteer policy (including probation details, performance reviewing, communication policies, time and attendance details, lone working policy, leave and absence policies, grievance and disciplinary procedures etc). | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 4.8 | Appropriate training & development procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Appraisal and review procedures, Training plans and records.• Defined roles and responsibilities, Opportunities to upskill and network.• Opportunities to avail of additional training as and when available and appropriate.• Opportunities for continued professional development.• Training accessed/used is recognised or fits in to the National Framework of Qualifications. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Give an assessment on what has been achieved to date? | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

| Standards Applicable to Organisations Providing Level 4 Psychotherapy Services | | | | |
|--|---|----------|-----------------|-------------|
| Standard 4.9 | Appropriate training & development procedures are in place | | | |
| Examples <ul style="list-style-type: none">• Service evaluation reports and processes in place.• Process, impact and outcome evaluations in place.• Complaints procedure.• Feedback forms or similar mechanisms. | | | | |
| Self Assessment | Not met <input type="checkbox"/> Just started <input type="checkbox"/> Making good progress <input type="checkbox"/> Fully met <input type="checkbox"/> | | | |
| Services are measured | | | | |
| | | | | |
| What remains to be done in this area? | | | | |
| | | | | |
| Organisation | Completed by | Position | Assessment Date | Review Date |
| | | | | |

Appendix 1

Glossary of Terms

- **Suicide** – The deliberate or intentional taking of one's own life
- **Bereavement** – The period after a loss (such as a death) during which grief is experienced and mourning occurs. The time spent in a period of bereavement depends on how attached the person was to the person who died, and how much time was spent anticipating the loss.
- **Prevention** – (In suicide) Actions directed to preventing suicide/promoting health to reduce the risk of harm or suicide.
- **Postvention** – (In suicide) actions directed to intervene in a crisis, support and assist those affected by a completed suicide.
- **Counselling** – Counselling involves talking with a person in a way that helps that person solve a problem or helps to create conditions that will cause the person to understand and/or improve his behaviour, character, values or life circumstances. Counselling is delivered by an appropriately trained, qualified and accredited Counsellor.
- **Psychotherapy** – Psychotherapy is generally a longer term treatment which focuses more on gaining insight into chronic physical and emotional problems. Its focus is on the patient's thought processes and way of being in the world rather than specific problems.
- **Outreach** – Outreach refers generally to efforts to increase the availability and utilisation of services, especially through direct intervention and interaction with a target public population in a local area.
- **Supervision** – Supervision is used in counselling, psychotherapy, and other mental health disciplines as well as many other professions engaged in working with people. It consists of the worker meeting regularly with another professional, not necessarily more senior, but normally with training, qualifications and accreditation in supervision, to discuss casework and other professional issues in a structured way.
- **Accredited** – Officially recognised as meeting the essential requirements, as of academic or professional excellence and as awarded by the relevant governing agencies or bodies.
- **National Framework of Qualifications** – The NFQ (www.nfq.ie) is the single structure mechanism for recognising all education and training in Ireland. All framework awards have an NFQ Level (1-10) which relates to the standard of learning and an NFQ Award-Type which indicates the purpose, volume and progression opportunities associated with a particular award.
- **Vetting** – Vetting is a process of examination and evaluation, generally referring to performing a background check on someone before offering him or her employment, conferring an award, etc. The Garda Vetting Unit will disclose (to the registered organisation) details of an individual's convictions and/or prosecutions, successful or not, pending or completed, in the State or elsewhere as the case may be.

Appendix 2

References and Relevant Reading

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Learning to Reach Out: Young people, mental health literacy and the Internet.

Inspire Foundation: Dublin.

O'Connell, Chapman & Graham (2011).

Delivering Mental Well-being Services Online.

RAMP.

Dept of Health and Children and HSE (2005).

Reach Out: National strategy for action on suicide prevention, 2005-2014.

Dept. of Health and Children: Dublin.

Petrus Consulting, Bates, U., Jordan, N., Malone, K., Monaghan, E., O'Connor, S. & Tiernan, E. (2008).

Review of General Bereavement Support and Specific Services Available Following Suicide Bereavement.

Dublin: National Office for Suicide Prevention.

National Office for Suicide Prevention (2009).

You Are Not Alone: Help and advice on coping with the death of someone close.

HSE: Dublin.

National Office for Suicide Prevention (2009).

You Are Not Alone: Directory of bereavement support services.

HSE: Dublin.

HSE (2012).

Suicide Prevention in the Community: A practical guide.

HSE: Galway.

Appendix 3

Relevant Agencies/Stakeholders to Consult with

- Other bereavement support groups as included in You Are Not Alone Directory
- Local suicide prevention networks
- HSE Resource Officer for Suicide Prevention or HSE Health Promotion staff with responsibility for mental health promotion
- Clergy
- Local undertakers
- Coroner for the local area
- Other health and social care professionals
- Active community groups such as Lions Club
- Local community Gardaí
- Any agencies that the group would like to make referrals to and those it would like to receive referrals from
- Any special interest groups which support minorities such as immigrants, LGBT community, Travellers etc
- Dept of Social, Community and Family Affairs
- Local Money Advice and Budgeting Service
- Local Community Council.
- Local Citizen's Information Centre

Appendix 4

Contact Details

Console

4 Whitethorn Grove
Celbridge, Co Kildare
Tel: 01 610 2638
Email: info@console.ie
Web: www.console.ie

National Office for Suicide Prevention

Population Health Directorate
Health Service Executive
Dr Steeven's Hospital, Dublin 8
Tel: 01 635 2139
Email: info@nosp.ie
Web: www.nosp.ie

Turas Le Chéile

303 Courtown Park
Kilcock, Kildare
Tel: 086 056 6819

HSE Resource Officers for Suicide Prevention

AREA: HSE Dublin Mid-Leinster
(Kildare, Wicklow, South Dublin)
Contact: Pauline O'Reilly
Dept of Health Promotion
HSE Dublin Mid-Leinster
52 Broomhill road
Tallaght, Dublin 24
Tel: 01 463 2800
Email: Pauline.oreilly@hse.ie

AREA: HSE Dublin Mid-Leinster
(Longford, Westmeath, Laois, Offaly)
Contact: Josephine Rigney
Suicide Prevention Resource Office
HSE Dublin Mid Leinster
Old Birr Hospital
John's Terrace
Birr, Co Offaly
Tel: 086 815 7850 / 057 932 7909 (Tullamore office)
Email: josephine.rigney@hse.ie

AREA: HSE Dublin North-East (North Dublin)
Contact: Roisin Lowry
HSE Suicide Prevention Resource Officer
Dept of Health Promotion
HSE Dublin North East
Park House
North Circular Road, Dublin 7
Tel: 01 882 3403
Email: roisin.lowry@hse.ie

AREA: HSE North East
(Cavan, Monaghan, Louth, Meath)
Contact: Garreth Phelan
Suicide Prevention Resource Officer
Health Promotion Unit
HSE Dublin North East
St Brigids Complex
Ardee, Co Louth
Tel: 041 685 0674
Email: garreth.phelan@hse.ie

Appendix 4

Contact Details

AREA: HSE South (Cork, Kerry)

Contact: Helena Cogan

Coordinator of Training and Support Services

HSE South

'Nemetona',

St. Stephen's Hospital

Glanmire, Cork

Tel: 021 485 8596

E-mail: Helena.cogan@hse.ie

AREA: HSE South (Waterford, Wexford,

Kilkenny, Carlow, South Tipperary)

Contact: Sean McCarthy

Suicide Resource Officer

HSE South

St Patrick's Hospital

John's Hill, Waterford

Tel: 051 874 013

Email: sean.mccarthy@hse.ie

AREA: HSE West (Limerick, Clare, North Tipperary)

Contact: Bernie Carroll

Suicide Strategy Coordinator

HSE West

St Joseph's Hospital

Mulgrave St, Limerick

Tel: 061 461 454

Email: berniem.carroll@hse.ie

AREA: HSE West (Galway, Mayo, Roscommon)

Contact: Mary O'Sullivan

Suicide Prevention Resource Officer

HSE West

1st Floor West City Centre

Seamus Quirke Road, Galway

Tel: 091 548 360

Email: mary.osullivan@hse.ie

AREA: HSE West (Sligo, Leitrim)

Contact: Mike Rainsford

Mike Rainsford

Mental Health Promotion Officer and Suicide

Prevention Resource Officer

HSE West

JFK House

JKF Parade, Sligo

Tel: 071 913 5061

Email: michaelp.rainsford@hse.ie

AREA: HSE West (Donegal)

Contact: Anne Sheridan

Mental Health Promotion/Suicide Prevention Officer

Dept of Health Promotion

HSE West

1st Floor, St Conal's Campus

Letterkenny, Co Donegal

Tel: 071 910 4693

Email: anne.sheridan1@hse.ie



National Office for Suicide Prevention
Health Service Executive, Dr Steeven's Hospital, Dublin 8
Tel: 01 635 2139 Email: info@nosp.ie Web: www.nosp.ie



Console
4 Whitethorn Grove, Celbridge, Co Kildare
Tel: 01 610 2638 Email: info@console.ie Web: www.console.ie



Turas Le Chéile
Whitestown House, Kilcock, Co Kildare
Tel: 086 056 6819