**RISK POLICY**

This policy outlines the process by which all Counsellors / Counsellors in Training working with Therapy Centre Services need to manage at risk clients.

**Risk Assessment**

When contracting with clients, GP details must be requested at the initial session for all clients and recorded on the client management system (Halaxy).

If the Counsellor / Counsellor identifies the client as being a potential risk, they will take the necessary steps to establish whether the client is an active risk. The aim is to discover, for suicidal clients, how much detail there is in their planning, whether they have the means, the lethality of their method, the likelihood of rescue, if there is the possibility of a rescue, how much awareness they have over the future as well as any threat to the health/safety of others. GP details must be recorded on the client management system (Halaxy) and where possible a next of kin, or other contact (family / friend) where the risk indicated is 2 or above.

**There are 5 levels of risk:**

0)  Non-existent: Essentially, no risk of harm to self.

1)  Mild: Suicidal ideation is limited, there are no resolved plans or preparations for harming oneself, and there are few known risk factors. The intent to commit suicide is not apparent, but suicidal ideation is present; the individual does not have a concrete plan and has not attempted suicide in the past.

2)  Moderate: Resolved plans and preparation are evident with noticeable suicidal ideation, possible history of previous attempts, and at least two additional risk factors. Or, more than one risk factor for suicide is present, suicidal ideation as well as intent are present, but a clear plan is denied; the individual is motivated to improve his or her current emotional and psychological state, if possible.

3)  Severe: Clearly resolved plans and preparation to inflict self-harm or the person is known as a multiple attempter with two or more risk factors. Suicidal ideation and intent are verbalised along with a well thought out plan and the means to carry it out. The individual demonstrates cognitive inflexibility and hopelessness about the future and denies available social support; there have been previous suicide attempts.

4)  Immediate: The client has already taken steps to end their life or is about to do so.

All identified risk should be clearly indicated in all text message handovers, and recorded in the client case notes. Should the client present with risk levels 1-4 the Counsellor / Counsellor in Training should notify their Account Manager and / or Supervisor as soon as possible following the session and discuss directly with them the risk identified. Any actions agreed should be recorded clearly in the case notes. Where risk is assessed at 3 or above the Counsellor / Counsellor in Training must notify their Supervisor at all times.

It should be noted that the GP holds clinical responsibility for the client and therefore this should be the first point of call for any necessary disclosure about risk to the client, and where possible agreement should be sought from the client to contact their GP, specifically at-risk levels 2, 3 and 4.

All clients at risk should be provided with a **Safety Plan** which they can refer to between sessions. This can be completed with the Counsellor in session.