





Partner Policy: Couples Counselling Policy

Introduction

WPO offers short-term solution-focused couples counselling to those looking to resolve issues or pressures in their relationship.

Policy

Single Session Therapy will be attempted with all participants accessing the EAP service. This includes those seeking couples counselling.

Couples counselling is not offered as a First Serve service.

When, following a telephonic/video clinical conversation, short-term solution-focused couples counselling is identified as the potentially most beneficial way forward for the participant, the intake clinician will refer both them and their partner to an appropriately qualified clinician for a further conversation where the needs of both the partners can be ascertained. This conversation will constitute the first session of the benefit and both the participant and their partner must attend together. The goal for short-term solution-focused couples counselling will be focussed around relationship concerns or any issues stemming from relationship concerns.

Following the clinical conversation with both partners, the clinician will review the outcome with a case manager and the way forward will be agreed. Options include agreeing on an appropriate focus for the completion of EAP short-term solution-focused couples' sessions or, where an appropriate goal cannot be established for short-term solution-focused work, a referral to another agency. The clinician providing the sessions will then communicate the outcome of this review to the participant to agree and implement the way forward.

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If couples' sessions are agreed as an appropriate way forward, the clinician cannot see either NETWORK member of the couple separately for any of the sessions. Both members of the couple must attend every session for the duration of the contract. However, where clinically appropriate, the clinician can see either or each member of the couple separately for part of any session.

Should only one member of the couple attend a session the clinician should explain that the session cannot proceed without both partners being present, contain any evident distress and request that they contact the EAP to agree the best way to proceed.

Couples counselling cannot be offered where recent or ongoing abuse is disclosed in the relationship, regardless of the form (physical, sexual, emotional, psychological, financial or spiritual) the abuse is taking. Controlling or coercive behaviour of any sort needs to be addressed by counselling services specialising in abusive relationships.

Wherever possible, the clinician conversation held with both partners, and any on-going EAP sessions arising out of that conversation, will be held in-person. Telephonic or Video access will only be offered in exceptional circumstances when in-person contact is not practicable; in these circumstances video counselling will be the preferred option wherever possible.

Referrals to couples counselling cannot be made concurrently with other EAP counselling support (e.g. where one or both of the attendees are already receiving individual counselling through the EAP).

If a participant wishes to engage in couples counselling while also engaging in individual counselling through an external service, the intake clinician will explain that engaging in multiple counselling engagements simultaneously are not recommended and can become confusing and/or overwhelming for the participant(s). If the participant(s) still wish to engage in this course of action, clinical appropriateness must be reviewed with Clinical Management who can authorise the couples counselling referral if it is considered that concurrent Couples/Individual counselling may be beneficial.

The ORS is not collected for those engaged in couples counselling.

Transitional Support cannot be offered to a couple following the initial telephonic/video clinical conversation with the participant. If during the clinical conversation with both partners a suitable short-term solution-focused goal cannot be identified for EAP sessions, a further session(s) may be agreed to transition the couple into more appropriate support if necessary.

Couples counselling cannot be offered if one or both of the partners present with addiction or the symptoms of mental health issues (e.g. Borderline Personality Disorder, Schizophrenia or Bipolar).

Couples counselling will not be offered if either of the partners are reported as at risk of harm to self or others. Appropriate steps to try and ensure the safety of both partners will be taken.

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Clinical Practice

- All contact between the EAP and the couple will be through the participant who initially
 contacts the service. Contact with the participant's partner will not be initiated though their
 name will be taken from the participant when the initial telephonic/video clinical
 conversation with the participant is completed. Should the partner call in requesting
 information regarding the progression of the case it will be explained that the participant will
 need to contact the EAP to discuss.
- Couples counselling may present additional danger to victims of abusive relationships (even if they are willing to participate). If this is indicated during the initial telephonic/video clinical conversation with the participant a clinical conversation with both partners will not be offered. However, where this abuse is assessed as being a one-off event, indicating overheated emotions in the moment rather than evidence of a relationship based on control and fear, nobody was physically hurt and there was no Police involvement, a clinical conversation with both partners may be offered but only following consultation with Clinical Management.
- Short-term counselling is generally suitable for mild to moderate, rather than severe, relationship distress. It is more likely to have a positive outcome if there is currently some evidence of positive sentiment between partners. (Note: an appropriate move toward separation may also be deemed positive.) It is helpful to assess the following here-and-now factors during the initial telephonic/video clinical conversation with the participant in deciding whether a clinical conversation with both partners is an appropriate way forward:
 - o What is the relationship problem as defined by the participant?
 - How does the participant describe their own behaviour(s) that may be contributing to the relationship problem? How do they perceive the behaviours of the other partner?
 - Does the participant report that both members of the couple are wishing to attempt change?
 - What work/family problems are reported as impacting the couple's relationship (e.g. parenting issues, blended families, step-parenting roles), and what strategies are currently being used to cope with these?
- Any clinician accepting a couple's clinical conversation must be fully briefed around what is
 expected from the engagement and what the potential outcomes may be. EAP Policy towards
 abusive relationships and what constitutes appropriate boundaries for couples counselling will
 be made clear.

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- The recommendation coming out of the clinical conversation with both partners may be that
 one, or both, of the members of the couple should engage in individual counselling before
 going forward with any couples' work. Either or both partners will then need to contact the
 EAP separately for a further telephonic/video clinical conversation to agree whether short-term
 counselling through the EAP would be likely to be beneficial, otherwise resources will be
 provided.
- It must be made clear to the participant that the clinician to whom they are referred must maintain clear boundaries and only see the couple within the context of their joint sessions.
 Maintaining a counselling relationship with either member individually could be clinically inappropriate or a violation of ethical standards.

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CHANGE HISTORY:

Document Original Author: Alison Brown; Vice President Global Clinical Quality

Stakeholders: Global Infrastructure, Clinical Operations, Quality, Learning & Development,

Sales & Account Management.

Change Date:	Approved by:	Subject Matter Expert(S) [SME] Utilized:	Description/Details of Change [Why & What]:
September 2020	Alan King	Alison Brown/ Maullika Sharma/ Maria Guimaraes	Document Initially Created
November 2020	Alan King	Alison Brown/ Maullika Sharma/ Maria Guimaraes	Annual Review; sessions may now be provided via telephone/video where inperson sessions are impracticable. Document updated in line with current naming conventions

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