

New Road Psychotherapy

Safeguarding & Risk Management Policy

1. Introduction

New Road Psychotherapy (NRP) is committed to providing a safe and supportive environment for all clients. This policy sets out our approach to safeguarding, risk management, and the appropriate use of emergency contacts. It applies to all therapists, trainees, supervisors, and placement staff working under NRP.

This policy sets out how New Road Psychotherapy approaches safeguarding and risk management across both sites. It is designed to support all therapists, trainees, and supervisors in holding the tension that sits at the heart of good clinical practice: respecting a client's autonomy while maintaining a clear duty of care.

The policy covers when and how to break confidentiality, how to assess and respond to different levels of risk — including in online sessions — and the appropriate use of emergency contacts. It outlines a clear escalation pathway for trainees, defines the responsibilities of each role, and sets expectations around documentation and supervision.

Underpinning everything here is a commitment to compassion, sound clinical judgement, and working within BACP/UKCP ethical frameworks. When in doubt, the principle is simple: consult your supervisor, document your thinking, and never act alone on a safeguarding decision.

2. Core Principles

- **Compassion and Non-Judgment:** All interactions are carried out with empathy and a non-judgmental approach.
- **Client Autonomy:** We respect a client's right to self-determination while holding a duty of care to minimise harm.
- **Risk Management:** A structured approach to assessing and responding to risk will always be followed.
- **Confidentiality with Limits:** Client information remains confidential unless there is a significant and credible risk of serious harm to themselves or others.
- **Legal & Ethical Compliance:** All staff will work within BACP/UKCP ethical frameworks and relevant legal obligations.

3. Confidentiality and When to Break It

Confidentiality is a cornerstone of therapy. It should only be broken when the risk of harm is serious, credible, and cannot be managed any other way. Grounds for breaking confidentiality include:

- Active suicidal intent with a plan and means
- Serious self-harm that is life-threatening
- Disclosure of child abuse or neglect (mandatory reporting applies)
- Risk of harm to a third party
- Abuse or neglect of a vulnerable adult

Where possible, inform the client before any disclosure is made. Always share the minimum information necessary, document your decision-making, and consult your supervisor or the Placement Manager before acting unless there is immediate danger.

4. Identifying & Assessing Risk

When a client presents with a safeguarding concern, the therapist will:

- Assess severity and intent — is there a plan, method, or timeline?
- Establish whether the client has the means to carry out any plan
- Review history of self-harm or previous crisis episodes
- Examine triggers and underlying issues
- Assess protective factors — supportive relationships, coping strategies, reasons for living
- Use risk assessment tools where appropriate

Risk Levels — Face-to-Face & Online

- **Low Risk:** Therapy continues with focus on coping strategies and underlying issues.
- **Moderate Risk:** Introduce a safety plan, identify triggers, and explore supportive contacts.
- **High Risk:** Develop a collaborative safety plan. Seek external support (GP, A&E) if needed and agreed. If immediate danger is present, emergency services may be contacted with or without consent depending on risk level.

For online sessions: confirm the client's location at the start of each session. Establish crisis protocols early and agree on a safety plan for between session distress.

Mental Health Rapid Response (Brighton & Hove): 0300 304 0078 — Mon–Fri 8am–10pm,
Weekends & Bank Holidays 10am–10pm. Also: 111 (Mental Health option) or 999.

5. Emergency Contacts

An emergency contact is provided by the client as part of their initial consultation. Its use is strictly reserved for genuine emergencies; situations where there is an immediate and serious risk to the client's life or safety and no other option is available.

During the Therapy Agreement

The therapist must discuss the emergency contact with the client at the outset and make the following clear:

- The nature of any communication will be limited to confirming a safety or physical health concern, no clinical information will be shared

Each case must be assessed individually. There is no one-size-fits-all approach. The suitability of the emergency contact must always be considered before any contact is made.

6. Escalation Pathway

Trainees must follow this pathway when a safeguarding or risk concern arises:

Trainee → Supervisor → Placement Manager → External Agencies

- **First point of contact:** Your supervisor. All clinical concerns and risk decisions must be discussed in supervision before action is taken.
- **Placement Manager:** Contact the Placement Manager directly if supervision is not available for several days, if there is an immediate risk, or if you need to escalate a disagreement about a clinical decision.
- **External agencies:** Police, social services, GP, or MARAC as appropriate. The Placement Manager will advise on when and how to involve external agencies.
- **Escalation to Director:** The Placement Manager will escalate to the Director (Rory) where required.

7. Roles & Responsibilities

- **Trainee:** Raise all concerns in supervision. Do not take unilateral action on safeguarding or confidentiality decisions. Document all risk discussions in the client's profile on RoomBooker.
- **Supervisor:** Provide timely, clinically sound guidance. Escalate to the Placement Manager where there is uncertainty or disagreement. Do not advise trainees to break confidentiality without a clearly evidenced risk threshold being met.

- **Placement Manager / Safeguarding Lead:** Final decision-maker on safeguarding matters within the placement. Available to trainees when supervision is not immediately accessible or where a clinical disagreement arises. Maintains and reviews this policy.

8. Documentation & Record-Keeping

- All risk assessments, decisions, and actions must be documented clearly and accurately in RoomBooker.
- If external agencies are contacted, record the details and reasons for the decision.
- If the emergency contact is used, document the justification, what was communicated, and to whom.
- All records must comply with GDPR and professional confidentiality standards.

9. Therapist Support & Supervision

- All therapists and trainees working with clients at risk must engage in regular supervision.
- CPD training on safeguarding, suicide prevention, and risk management is expected.
- Trainees are encouraged to raise any uncertainty or discomfort about a case — there is no such thing as an unnecessary question when client safety is involved.

10. Policy Review

This policy is owned by New Road Psychotherapy and will be reviewed annually or following any significant safeguarding incident. Updates will be communicated to all therapists, trainees, and supervisors.

Contact Information: If you have any questions or concerns about this policy, please email admin@newroadpsychotherapy.com.

Review and Revision: This policy will be reviewed annually and updated as necessary to ensure it remains relevant and effective.

Effective Date: April 2026