Clinical

Complementary Therapies Policy

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POLICY STATEMENT
COMPLEMENTARY THERAPIES POLICY

1.0 Position Statement

1.1 Within the areas of health and social care delivered by South Staffordshire and Shropshire Healthcare NHS Foundation Trust, many clinicians are expanding the spectrum and variety of services to be offered to patients/service users within the hospital and community. These services are designed to complement and support the recovery process and/or maintain the individual's well being. Ref: Nursing and Midwifery Council June 2003.

2.0 Purpose of this Policy

2.1 The purpose of this policy is to ensure that a framework exists to ensure in all areas where Complementary Therapy is offered, people delivering the Therapies will be appropriately trained, regulated and supervised, and that the Therapy is performed in a safe and satisfactory manner, and also that it is appropriate to be used for that particular service user. It is recognised volunteers in the Trust may deliver Complementary Therapies, supported by a clear Volunteer Complementary Therapies role descriptor – See Appendices 4. Any Therapy outside of the 4 agreed within this policy can be brought before the Complementary Therapy Steering Group for discussion and decision.

3.0 Philosophy of the Organisation

3.1 South Staffordshire and Shropshire Healthcare NHS Foundation Trust endeavours to offer a choice of interventions which are not always part of mainstream Therapy, but are nationally recognised in enhancing quality of life, aiding the recovery process or maintaining health and wellbeing, through MDT personalised care planning and agreement and documentation.

4.0 Empowerment

4.1 It is the intention of this organisation to ensure that any individuals receiving care will have choices offered to them and, where appropriate, the specific Complementary Therapy will be explained in detail to them, discussed with the Care Team as part of the package of care and documented in the service users care plan/CPA documentation, prior to delivery of the agreed therapy.

5.0 Defining the Therapies

5.1 Complementary Therapies are described as the specific activities and interactions which complement, support or supplement that which is already being provided as part of a treatment regime or where there is a planned programme of care. Complementary Therapies are independently used to aid relaxation/relaxation techniques; to provide pain relief; support health promotion and often form part of treatment regimes, which give some alternatives to medication.
5.2 Further guidelines “…address issues which are directly related to patient safety in the provision of Complementary Therapy services including clinical governance, regulation and training of Therapists and audit and evaluation”, Professor Mike Richards, the Department of Health’s National Cancer Director.

6.0 Listing of Complementary Therapies that have been approved and recognised nationally, supported across the Trust

6.1 The definitive list of agreed Complementary Therapies provided by South Staffordshire and Shropshire Healthcare NHS Foundation Trust was formally adopted by the Quality, Effectiveness and Risk Committee in June 2008 in order to make this policy active. The Trust has agreed this list as follows:

- **Acupuncture** – body and auricular.  
  The insertion of a needle into the skin and underlying tissues in special sites, known as points, for therapeutic or preventative purposes.
- **Aromatherapy.**  
  The controlled use of plant essences for therapeutic purposes. Carrier Oils agreed for usage are Grape Seed Oil and Almond Oil. Essential Oils agreed for usage are Lavender, Melissa Oil and Roman Camomile. These oils have been agreed with the Chief Pharmacist.
- **Massage** – Indian head, body, baby/infant, sports.  
  A method of manipulating the soft tissue of the body areas using pressure and traction.
- **Reflexology.**  
  A therapeutic method that uses manual pressure applied to specific areas, or zones, of the feet (and sometimes hands and ears) that are believed to correspond to other areas or organs of the body, in order to relieve stress and prevent and treat illness.


6.2 Applications for other Therapies will stimulate a review of this policy to see whether its scope should be widened to include that proposed Complementary Therapy or not.

7.0 Practitioners and Accountability

7.1 Individual Complementary Therapists are responsible for individual practice, including the safe storage of any equipment, oils etc. The Complementary Therapy qualified NHS professional is ultimately accountable for the care delivered to the service user. Therefore the plan of care involving Complementary Therapies must be agreed with the clinical team and Responsible Medical Officer (RMO)/Responsible Clinician (RC)/Care Coordinator/Case Manager before any Complementary Therapy is delivered, and agreement documented in the clinical record. Qualified Complementary Therapist can write care plans specific to the use of Complementary Therapies, and these can be delivered by appropriately qualified staff who are registered on the Trust Complementary Therapy Register, with supervision/guidance/support.
from an appropriately qualified member of staff. Volunteer Complementary Therapists will work with ward staff to develop an appropriate care plan to address complementary therapy service delivery.

7.2 All SSSFT staff delivering Complementary Therapies on behalf of South Staffordshire and Shropshire Healthcare NHS Foundation Trust, ie to SSSFT service users, as part of their care package, must be registered on the SSSFT Complementary Therapy Register. This register will be maintained by the Complementary Therapies Steering Group and the Allied Health Professions Lead.

7.3 SSSFT volunteers delivering Complementary Therapies to SSSFT service users are registered through the Trust Volunteer process, have the appropriate professional indemnity insurance and have agreed to and signed the Volunteer Complementary Therapist role descriptor (see Appendices 4). To ensure a baseline of qualification, the Volunteer Complementary Therapist must be registered on the SSSFT Complementary Therapy register to assure practice at the level agreed within the organisation, meet their regulatory body requirements required to practice the Complementary Therapy and have their own personal insurance to cover delivery of sessions within SSSFT.

7.4 All SSSFT practitioners using Complementary Therapies will abide by the Code of Conduct of their professional body, eg nursing, physiotherapy. All such Practitioners will follow these principles:

- Have a commitment to maintaining and improving their knowledge and competence through ongoing Continuous Professional Development (CPD) in their specialism.
- Promote and safeguard the interests, safety and wellbeing of their patients/service users/carers.
- Be aware of the deficits or limitations in knowledge and competence and decline any duties or activity unless they are able to be performed in a skilled and safe manner.
- Deliver only those Complementary Therapies for which the staff member is registered on the Trust Complementary Therapy Register.

7.5 Staff can apply to be registered at any time. The register will be updated every 2 years and application to this register will be through the Operational Line Manager, the Professional Line Manager and the Complementary Therapies Steering Group, where final approval will be given. This decision is held jointly between Healthfirst and SSSFT.

7.6 Records of the registration will be kept on the staff file and include approval onto the Complementary Therapies register, also records of training and qualifications obtained to perform Complementary Therapies. The individual is responsible for notifying their Line Manager of any changes that affects their Complementary Therapy practice.

7.7 Trust staff trained in Arm and Hand Massage and Indian Head Massage through Healthfirst are shown as an Appendices on the Trust Complementary Therapy
Register. This training does not meet criteria for full inclusion on the register. Staff trained in these 2 interventions must adhere to the boundaries of this specific training.

7.8 Acupuncture practitioners must be accredited with SMART (Substance Misuse Acupuncture Register and Training), NADA (as from 1 July 2015, NADA (the National Acupuncture Detoxification Association) was added as a valid recognised professional group with immediate effect) and/or the British Acupuncture Accreditation Board, and attend annual updates to maintain registration with the professional body.

7.9 Complementary Therapy practitioners must comply with the requirements of their Complementary Therapy professional body and ensure they remain eligible to register, acknowledging some courses need to be registered 12 monthly eg Auricular acupuncture.

7.10 If the Complementary Therapy practitioner moves work base/roles it is their responsibility to inform the Complementary Therapies Register of their change of base/role.

7.11 Complementary Therapy practitioners hold an appropriate level of diploma or degree level qualification or equivalent within Complementary Therapies. They should have proof of successfully attending an approved course. It may also be acceptable if a Complementary Therapy is included within their professional qualifications. An example of this is Physiotherapy where acupuncture is part of core skills.

8.0 Principles of Complementary Therapy Practice

8.1 Empowerment
8.1.1 Each person receiving this service must give their consent, demonstrating in their care record that they understand the benefits and risks associated with the Complementary Therapy, and may withdraw consent at any time. Consent will be documented in the care record. Where Mental Health capacity is a concern, consent can be given by the carer, family member, in discussion with the Multidisciplinary team/RMO/Responsible Clinician. It is best practice in these cases to ensure carers/families have been given written information about the specific therapies offered.

8.2 Participation and Consultation
8.2.1 Each Complementary Therapy practitioner can deliver the agreed Therapy after consultation with the service user, Responsible Medical Officer/Responsible Clinician and the care team. Carer’s views should also be considered. A range of Therapies may be discussed with the service user, carer and care team and written consent to Complementary Therapy should be recorded in the integrated clinical record. Complementary Therapies will be documented in the service users care plan, and underpinned by CPA or equivalent care management process. Please note, carrier oils only and not essential oils can be used with pregnant and breast feeding women.
8.3 Authority to Practice

8.3.1 **Practitioners’ Responsibilities.** In order to practice Complementary Therapy the individual must be on the Trust Complementary Therapies Register. This will include the type of Trust approved Therapy/ies to be utilised by the individual practitioner (see page 4(6)). There may be occasion where any member of Trust staff assists the individual Complementary Therapy practitioner to deliver the Complementary Therapy.

8.3.2 **Staff employed by SSSFT delivering Complementary Therapies.** The practitioner will maintain contemporaneous records in the service user's care records, and care plan.

8.3.3 **Complementary Therapists not employed by SSSFT delivering Complementary Therapies,** eg Volunteer Complementary Therapists will undertake an assessment with the service user, agreed with ward staff, deliver agreed Complementary Therapy intervention and feedback interventions/session outcomes before they leave the session, face to face to appropriate staff for documentation in the contemporaneous care records.

8.3.4 Please note ‘professional’ students/learners, eg Medical, Nurses, Allied Health Professions, Social Worker, Psychology, are **not permitted to practise/deliver Complementary Therapies under this policy.**

8.3.5 It is the Complementary Therapy practitioner’s responsibility to maintain their Regulatory Body standards, including Continuing Professional Development. Some CPD opportunities are provided by SSSFT working with Healthfirst, eg refresher sessions and supervision sessions.

8.3.6 Minimum requirements for South Staffordshire and Shropshire Healthcare NHS Foundation Trust Complementary Therapists are:
   - Recognised Complementary Therapy Qualification, minimum Level 3 Diploma.
   - Member of Regulatory Body.
   - Evidence of practitioner’s supervision for Complementary Therapy.
   - Evidence of ongoing CPD for Complementary Therapy.
   - Compliance with Trust policies.
   - Accepted onto Trust Complementary Therapy Register.

8.4 Specific, targeted Complementary Therapy intervention - Arm and Hand Massage. Research has shown (articles produced by Professor C Ballard and C Holmes) the effectiveness of a specific intervention – Arm and Hand Massage, with Melissa Oil. Specific targeted training will equip SSSFT staff, without formal Complementary Therapy qualifications, to deliver this intervention. These staff will be listed as trained in this specific intervention through Healthfirst on the Trust Complementary Therapy Register Appendices and provided with supervision and CPD on an annual basis if this is agreed within training plans.
9.0 Responsibility of the Management

9.1 The line manager is accountable for the following:-

9.1.1 Seeing the original Complementary Therapy qualification certificate. Sign photocopied qualification certificate to state they have seen the original. This is sent, with the application, to be placed on the Trust Complementary Therapy Register, to the Complementary Therapy Steering Group Lead.

9.1.2 That the practitioner fulfils the Trust criteria and is on the Trust Complementary Therapy Register. See acceptance letter and store in file.

9.1.3 That the Complementary Therapy proposed/delivered is part of the care plan and is agreed by the care team, RMO/RC and care planned in the electronic care record.

9.1.4 The service user has consented to the Complementary Therapy and consent is documented in the case notes. In some circumstances, where capacity issues are recognised, carer/family consent is documented.

10.0 Trust Responsibility

10.1 Complementary Therapies delivered to service users is covered by the Trust’s insurance scheme for SSSFT employed staff. This means staff delivering Complementary Therapies to service users as part of an agreed care plan, compliant with the Trust Complementary Therapy Policy, are not required to provide personal professional indemnity. Volunteer Complementary Therapists are not covered by this insurance and **ARE required to provide personal indemnity**.

11.0 Responsibility of the Complementary Therapy Steering Group

11.1 To maintain expertise in a range of Complementary Therapies and advise on updates in information to include best practice, new practice and risks. It is the responsibility of the Complementary Therapy Steering Group to disseminate key information to Complementary Therapy practitioners on the Register.

11.1.1 Maintain and update the Trust Complementary Therapy Register.

11.1.2 Review applicants to the Register and approve applications to the Register.

11.1.3 Provide justification for non approval.

11.1.4 Review the evidence base for Complementary Therapy interventions not currently on the Register.

11.1.5 Make recommendations for inclusion/exclusion on the Complementary Therapy Register based on the review.

12.0 Supervision

12.1 All practitioners of these Therapies will have a competent supervisor with regular documented supervision, which includes guidance and support, relevant to the delivery of the Complementary Therapy.
13.0 Supervisors’ Role

13.1 Any registered Complementary Therapy practitioner, delivering the Complementary Therapy, can provide Complementary Therapy supervision. Documented supervision can form evidence for Knowledge and Skills Framework (KSF) outline/appraisal and ongoing CPD.

14.0 Complementary Therapy for South Staffordshire and Shropshire Healthcare NHS Foundation Trust Staff

14.1 Complementary Therapists who deliver Complementary Therapies to SSSFT staff (e.g., through Health and Well Being) are not employed by SSSFT and are not required to be registered on the Trust Complementary Therapy Register. The Therapists are required to meet the professional standards required by professional bodies for regulation and have their own professional indemnity insurance. Where Complementary Therapies are offered to staff, the Therapists will ensure consent to treatment, review notes and outcome measures are maintained.

15.0 Volunteers

15.1 Any person wishing to deliver Complementary Therapies in a voluntary capacity must:
   15.1.1 Be accepted into the Trust via the Trust Volunteer process.
   15.1.2 Adhere to the Trust Volunteer Policy.
   15.1.3 Apply to be accepted onto the Trust Complementary Therapy register.
   15.1.4 If accepted, deliver Complementary Therapies within an agreed clinical service and in line with the role descriptor for the Volunteer Complementary Therapy role.
   15.1.5 Be in line with the Policy around insurance.
To be used in conjunction with South Staffordshire and Shropshire Healthcare NHS Foundation Trust Complementary Therapy Policy. Therapies approved for Register (Section 6, page 4) are as follows:

I have read the Trust Complementary Therapy Policy and wish to apply for registration to deliver Complementary Therapies:
(Please select one option)   a. Within my area of work.  b. As a volunteer.

Signature ........................................ Date ........................................

I wish to deliver (please indicate all Therapies you are applying to deliver):

1. Acupuncture [ ] Auricular [ ] Body [ ]
2. Aromatherapy [ ]
3. Massage [ ] Indian Head [ ] Body [ ] Baby/Infant [ ] Sports [ ]
4. Reflexology [ ]
5. Others [ ] to be agreed through Complementary Therapies Steering Group, and may require full review of Policy.

<table>
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<tr>
<th>Name</th>
<th>Post/Profession</th>
<th>Level of Complementary Therapy Qualification (Minimum Level 3 Diploma)</th>
<th>Approving/Regulatory Body</th>
<th>Date Obtained</th>
<th>Complementary Therapy Supervision attend 2 CPD/supervision sessions per year</th>
<th>Evidence of Complementary Therapy CPD/Update</th>
<th>I have read and agree to the Trust Complementary Therapy Policy</th>
<th>Is this Documented in your Job Description Yes/No</th>
<th>Personal Liability Insurance Yes/No</th>
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Anyone delivering Complementary Therapies within the Trust is required to be registered on the South Staffordshire and Shropshire Healthcare NHS Foundation Trust Complementary Therapies Register.
Please complete this form and return to Jo Spence, PA to the Allied Health Professions Lead, for discussion at the next Complementary Therapy Group Meeting.
Dear

Re: Application for Inclusion on the South Staffordshire and Shropshire Healthcare NHS Foundation Trust Complementary Therapy Register

Thank you for your completed application for the above.

The South Staffordshire and Shropshire Healthcare NHS Foundation Trust Complementary Therapy Steering Group met on and reviewed your application.

The result is:

a. Successful application to practice . Requirement to adhere to Trust Policy around renewal.

b. Require more information and then resubmit. Information required ..... 

c. Application refused for the following reasons ..... 

Yours sincerely

Allied Health Professions Lead
On behalf of the Complementary Therapy Group
Appendix 3

Example of Complementary Therapy Register/Database maintained by the Trust

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<tr>
<th>Surname</th>
<th>First Name</th>
<th>Job Title</th>
<th>Directorate</th>
<th>Team</th>
<th>Work Base</th>
<th>Complementary Therapy</th>
<th>Qualification Date</th>
<th>Qualifying/ Awarding Body</th>
<th>Complementary Therapy Supervision</th>
<th>Complementary Therapy CPD Requirement</th>
<th>Client Group</th>
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The Trust will not accept vicarious liability for Complementary Therapy practice, therefore Complementary Therapists required to maintain own personal liability insurance.
Draft Role Descriptor for Volunteer Complementary Therapist

ROLE DETAILS:

ROLE TITLE: Volunteer Complementary Therapist

HOURS: To be arranged in advance with ward staff

DIRECTORATE: For example: Mental Health (or other inpatient unit)

LOCATION: For example: St George’s site, Corporation Street, Stafford

REPORTS TO: AHP Clinical Lead

ACCOUNTABLE TO: Ward Manager/Lead Occupational Therapist for the inpatient unit

ROLE DESCRIPTION

• Adhering to the Trust policy, national guidance on best practice, to deliver agreed Complementary Therapies (Arm and Hand massage using agreed base oil and dry Indian Head massage without the use of essential oils) to people in the inpatient units on St George’s site.

• Provide the agreed Complementary Therapies to those service users identified by Ward staff as potentially benefiting from the input and care planned in the care record.

• Supporting service users through the Complementary Therapy intervention and reporting outcomes to Ward staff for documentation in the clinical record.

• Embracing the concept of recovery and demonstrating this in the role.

• Ensuring the therapies delivered are evidence based, up to date and delivered in accordance with current policy, legislation and Trust Complementary Therapy Policy.

• Be responsive to feedback from Ward staff, particularly around risk management, to maintain safety of service users, Ward staff, visitors and self.

• Deliver interventions in the most beneficial way following discussion with Ward staff around potential risks. Although the intervention is delivered on an individual basis, this could be done in a small group setting. All interventions delivered in the open ward area.
WORKING RELATIONSHIPS:


ROLE PURPOSE: For example: To deliver a volunteer Complementary Therapy session using Arm and Hand massage and Indian Head massage to people using inpatient Mental Health services on St George’s site, adhering to policies, procedures, guidance and standards of the therapy and the Trust and adhering to the professional code of conduct, ethics and performance as laid down by the Complementary and Natural Healthcare Council (CNHC).

ORGANISATIONAL STRUCTURE:

KEY DUTIES AND RESPONSIBILITIES:

Client Work
- To deliver Arm and Hand massage using agreed base oil and dry Indian Head massage to service users on the inpatient wards.
- Service users will be identified by ward staff.
- To be informed by ward staff of any current risks on the ward.
- To deliver Complimentary Therapies in the open ward environment.
- To feedback interventions to ward staff so information can be documented on RiO.
- To have support from ward staff and meet on a one to one basis with a member of the ward team, for a debrief before finishing the session (supervision/debrief).
- To maintain Complementary Therapy skills and knowledge as required by the Complementary and Natural Healthcare Council regulatory body.

Administration
- Complete local induction and document outcomes with supervisor.
- Register on the Trust Complementary Therapy register as a Volunteer Complementary Therapist, meeting Trust requirements - insurance liability.
• Complete proforma/checklist with service users prior to Complementary Therapy delivery and hand to ward staff for inclusion in service users clinical record.
• To feedback outcomes/interventions to staff so they can document information on RiO.
• To agree with ward staff the best way/frequency to record service user feedback (Meridian?).

General
• Maintain and develop your own knowledge and practice through supervision and ongoing training so as to fulfil your regulatory requirements and role as an effective volunteer staff member.
• Contribute to regular meetings with Occupational Therapy Clinical Lead/member of the ward team/Trust Volunteer Lead to discuss the volunteer role and outcomes.
• Demonstrate ongoing commitment to evidenced based practice and keep up to date with effective Complementary Therapy service delivery.
• Demonstrate commitment to the equal opportunities and confidentiality policies of South Staffordshire and Shropshire Healthcare NHS Foundation Trust.
• Demonstrate commitment to anti-discriminatory practice.
• Take part in training identified by ward staff/self as relevant to the volunteer role, eg Complementary Therapy refresher training, local induction training, provided by South Staffordshire and Shropshire Healthcare NHS Foundation Trust or other relevant agencies, to maintain best practice in line with the Complementary and Natural Therapy Council (CNHC) and SSSFT Complementary Therapy Policy.

SYSTEMS AND EQUIPMENT
• Ensure COSHH and other risk assessments are undertaken with ward staff on any equipment proposed to be used in the ward environment and ensure safe storage when in use and when not in use.
• Provide own insurance for the delivery of Complementary Therapies, as per regulatory body requirements.

DECISIONS AND JUDGEMENTS
• Make decisions based on effective communication and risk management information shared by ward staff. Seek advice from ward staff for any concerns.
• Identify own training needs, utilise sessions with Occupational Therapy Lead effectively and keep up to date with best practice.
• Demonstrate awareness of boundaries and confidentiality at all times.
• Know the process, and be confident to report issues that may concern you.

COMMUNICATION AND RELATIONSHIPS
• Effectively communicate and work collaboratively with a range of people including service users, carers, family members, ward staff, to ensure effective Complementary Therapy sessional delivery to meet service users’ needs.
• Work within and promote integrated recovery focused service delivery across inpatient units.
• Be professional at all times eg time keeping, dress, language and behaviour in line with the Trust Vision, Values, Aims and Behaviours (located at http://www.sssft.nhs.uk/images/Corporate/Strategic_Plan/SSSFTStrategicOverview.pdf).
• Take part in appropriate training and development as agreed with the Lead Occupational Therapist.

PHYSICAL DEMANDS OF THE JOB
• Working across inpatient units, who provide a 7 day a week service - meet regularly with Lead Occupational Therapist to support the role.
• Attend training and meetings as required by the role and agreed with Lead Occupational
 Therapist.

- Agree flexible working, including evenings and weekends to meet service needs and preferences and contribute to/compliment the range and timing of activities offered across 7 days for service users.

**ROLE STATEMENT:**

**Infection Control**

Maintain an up to date awareness of the infection control precautions relevant to your area of work and implement these in practice. As a minimum, this must include hand hygiene, the use of personal protective equipment, the use and disposal of sharps and communicating the importance to patients, prison staff and other health care staff you are working with. Details of the precautions and sources of advice and support to assess and manage infection control risks are provided through mandatory training which all staff must attend at intervals defined in the Trust policy on mandatory training and can be found in the Trust’s infection control policies and national guidance, such as that published by NICE.

**Learning and Development**

As a volunteer of the Trust, you have a responsibility to participate in undertaking learning and development activities as appropriate for your role.

**Health and Safety**

As a volunteer of the Trust you have a responsibility to abide by the safety practices and codes authorised by the Trust. You have an equal responsibility with management, for maintaining safe working practices for the health and safety of yourself and others.

**Dignity at Work Statement**

South Staffordshire and Shropshire Healthcare NHS Foundation Trust are committed to treating all of our staff and volunteers with dignity and respect. You are responsible for behaving in a way that is consistent with the aims of our Equality and Diversity Policy. This includes not discriminating unfairly in any area of your work and not harassing or otherwise intimidating other members of staff or volunteers.

**Safeguarding Children and Vulnerable Adults**

All Trust employees and volunteers are required to act in such a way that at all times safeguards (and promotes) the health and well being of children and vulnerable adults. Familiarisation with and adherence to Trust Safeguarding policies is an essential requirement of all employees and volunteers as is participation in related mandatory/statutory training.
Appendix 5

Process for reviewing applications for the Trust Complementary Therapy Register with Authority Partnership Agency – Healthfirst

As the Complementary Therapy Group meets twice a year, a more responsive system to ensure timely entry onto the Trust Complementary Therapy Register was developed. This ensures a quick response between receiving the application, obtaining a decision and notifying the staff member and their manager, of the outcome of the application. The Authoring Partnership was developed with Healthfirst as an extension from the partnership with Staffordshire University Faculty of Health, when the University course closed.

1. The application form (located in the Trust Complementary Therapy Policy at Appendices 1) is completed by the applicant and authorised by the operational manager.
2. The form is forwarded (paper copy or electronic version) to the PA to the Chair of the Complementary Therapy Meeting (currently the Trust AHP Lead).
3. The application is anonymised to meet SSSFT Information Governance standards and emailed to Healthfirst for a decision within 2 working days of the application being received.
4. Decision making process is based on meeting the requirements outlined in the Trust Complementary Therapy Policy.
5. An outcome is emailed from Healthfirst to the PA with 5 working days, confirming if the person is eligible for entry onto the Trust Complementary Therapy register.
6. Using an agreed standard letter proforma, the staff member and their manager are informed of the outcome of the application.
7. Successful applications are entered onto the register within 5 working days of the outcome being received into SSSFT.

Debbie Moores
August 2016

Review as required by changes to Authorising Partnership or Information Governance guidance.
Lots of people who work in Mental Health and Learning Disability Trusts have started to help service users with Complementary Therapies.

Complementary Therapies are things like:

- Acupuncture
- Aromatherapy
- Indian Head Massage
- Reflexology

They help people in different ways such as making pain better or relaxation.

Complementary Therapies haven’t been used much in healthcare before, so the Trust wants to make sure that they are being used safely.
The Trust is going to keep a list of staff who use Complementary Therapies.

Staff will have to be properly trained to use the therapy and keep up-to-date with anything new.

Service users will be asked if they want to have a Complementary Therapy before it is given. They can say no or change their mind at any time.

Everyone who uses Complementary Therapy as part of their job will have someone they can talk to about it so they can get any help they need.