POSITIVE PSYCHOLOGY IN PRACTICE GUIDANCE

SAFE PRACTICE

2024

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Safe Practice Guidance

What is Safe Practice?

Within the context of Positive Psychology Practice, this term refers to the following areas:

1. Scope of Practice
2. Mode of Practice
3. Philosophy of Practice
4. Reflective Practice

This document explains the meaning of the above four areas in relation to your practice, and it does so in order to provide support in working safely with your clients. It also covers safeguarding, risk assessment, how to refer clients whose needs exceed your scope of practice, and how to process complaints where safety has or may be raised.

For the purpose of this document, “safety” and “safe” are terms used to refer to the client’s and practitioner’s safety from a psychological perspective. It focuses on non-clinical practice where the practitioner is neither trained nor insured to engage their clients in a therapeutic or clinical process . Psychological safety sits alongside physical safety in practice. Practitioners must adhere to health and safety policies and practices already established in their area of work. For example, general health and safety, first aid, mental health first aid, and equality and diversity.

This document is designed as a general guide for safe practice. With this in mind, it may not meet all aspects of working safely with your client/s, nor their specific needs as they emerge. Please build on what we present in a way that makes sense for the needs of your specific practice.

We invite you to provide us with feedback on how this document could be made more inclusive of your client needs, as well as your own, when it comes to running safer practices.

To provide us with your feedback, or ask any questions about this document, please contact our team at: membership@ppnetwork.org

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What are Safe Practice Principles?

Principles are fundamental rules, guidelines, and building blocks encompassing philosophy and modalities in the support of a particular system. Safe Practice Principles assume that respect for each of these 4 areas - Scope of Practice, Philosophy of Practice, Reflective Practice, and Mode of Practice - will increase the likelihood of safe practice during client engagement for both the client and the practitioner.

What is a Scope of Practice?

Scope of Practice refers to the practitioner's qualification, competence, experience, and capacity to work with clients within a particular context. It includes:

- The knowledge base that the practitioner is qualified to work from (e.g. Strengths, Authenticity, Resilience, Positive Emotions, Motivation);
- The general and specialised approaches towards working with clients in consideration of a variety of expected outcomes such as supporting growth and development (e.g. psychoeducation, positive interventions, guided reflective practice, coaching, training, facilitation, research);
- The degree of practitioner competence in dealing with mental health, diversity, and neurodiversity issues should they arise, and developing a system to recognise when this falls outside of their scope of practice leading to the need to refer onwards to a competent practitioner.

Scope of Practice understanding is important for the following reasons:

1. To communicate the practitioner's boundaries and the point at which a referral might need to be made should the client's needs fall outside of the scope of practice. This is an important discussion point during the contracting of clients and it helps to manage expectations.
2. The practitioner is reminded where the boundaries of their practice lie for insurance and liability coverage and client decision-making. It is natural for these boundaries to evolve and extend over time as the practitioner engages in further CPD learning and develops more experience in their practice.

Your qualifications and experience will inform your Scope of Practice. If you are unsure, please ask a member of our team: membership@ppnetwork.org

What is a Mode of Practice?

Mode of Practice refers to modalities used when working with clients (tools, processes) that you are qualified and competent to use during your client engagement. These will fall within your scope of practice and are informed by your philosophy of practice (see page 5) . They will be further supported in use by your reflective practice (see page 6) with regard to their efficacy and timing.

Examples of client modalities include but are not limited to:

- Surveys and questionnaires for client assessment (e.g. strengths, wellbeing)
- Needs analysis and case formulation exercises for client assessment
- Theoretical assumptions to inform or guide client assessment
- Thematic analysis exercises to inform or guide client assessment
- Theoretical frameworks to inform or guide psychoeduction
- Evidence-based Positive Psychology Interventions
- Application of coaching skills and models during client engagement
- Application of training skills and models during client engagement
- Application of facilitation skills and models during client engagement
- Application of research skills and models during client engagement

Mode of Practice is important for the following reasons:

To communicate to the client that the practitioner is drawing on evidence-based and person-centred approaches towards assessment of the client's needs and their progress as opposed to reliance on intuition or guesswork. A practitioner might have professional instincts and insights, however these should always be reinforced by objective processes that inform assessment and analysis, and the relevant skills to employ these approaches.

The practitioner is reminded that they have a standard process for working with clients and are using tools and processes that they have been suitably trained in and are qualified to use through skilful employment. Practitioners must investigate any new modes of practice through further research and/or qualification prior to their application in professional practice, and conduct an evaluation of their safety criteria prior to any client engagement as part of risk assessment (see page 7).

If you are unsure what your Mode of Practice is, please ask a member of our team: membership@ppnetwork.org

What is a Philosophy of Practice?

Philosophy of Practice describes your ontological positioning and the beliefs and assumptions that inform your style of client engagement. It overlaps with Scope of Practice with regard to knowledge and skills, and may include the following:

- Scientific approach (evidence-based, practitioner guided/led)
- Humanistic approach (person-centred/led, creative, somatic)

It also captures the personal values that inform your practice (e.g. kindness, respect, collaboration, resilience). If you are a Professional Member of the Positive Psychology Guild (PPG), the values supporting your practice should also cover PPG's 6 Core Values, which are:

1. Safety & Wellbeing
2. Equality & Diversity
3. Authenticity
4. Integrity
5. Positive Communication
6. Energy & Presence

In addition, safe practice is supported through active and reflective listening, and critical thinking.

6 Core Practitioner Values (Coker & Higgins, 2023)
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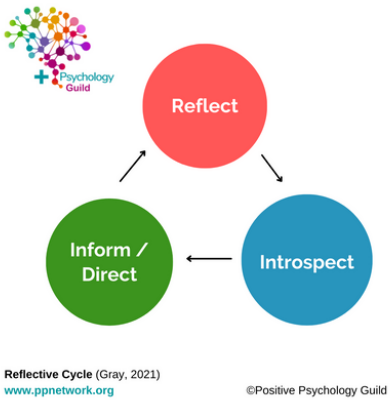
Philosophy of Practice understanding is important for the following reasons:

To communicate to the client how the practitioner approaches their client engagement. This may include the knowledge, skills, values, and beliefs that shape their attitude to practice. Being explicit with a client on a philosophy of practice can help to manage expectations and should be discussed during contracting.

The practitioner is reminded of their motivation to practice and the philosophical assumptions that inform their client engagement. This can help to clarify processes and inform decision-making for contracting, client intake, and client support and development. Like a Scope of Practice, a Philosophy of Practice may evolve over time as the practitioner engages in CPD and gains experience.

If you are unsure what your Philosophy of Practice is, or how to go about creating one, please ask a member of our team: membership@ppnetwork.org

What is a Reflective Practice?



Reflective Cycle (Gray, 2021)
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Reflective Practice describes a continuous process of self-reflection in relation to a subject or situation. It includes introspection (i.e. looking inwards) and extrospection (i.e. looking outwards) to better understand oneself and one's place in the world. This process generates conscious insights that can inform or direct future decisions, actions, and behaviours, which can support safer practice.

Positive Psychology emphasises reflective practice during training and beyond qualification into practice. It is a core part of working with clients, and takes place outside of the client engagement. It is generally practiced alone (e.g. through contemplation, reading, researching, observing, writing, drawing). It is best practiced when the practitioner is present and attentive. Where a practitioner is struggling to be present and attentive, activities such as mindfulness and physical activity can help to shift the practitioner's state/s and facilitate presence and attention.

The practitioner may enhance a personal reflective practice with engagement in a Community of Practice or professional supervision. A professional supervisor may be a Positive Psychology Practitioner who is suitably qualified and experienced to offer supervision to support the psychological wellbeing or professional development of the practitioner.

Reflective Practice is important for the following reasons:

To communicate to the client that the practitioner is committed to observation of self as well as client in their professional practice, and is aware of the importance of tending to their own needs and development as part of an ethical practice.

The practitioner is more aware of what is happening inside of them (e.g. their thoughts, emotions, feelings, physical sensations) which may help them to better understand and fulfil their needs, and when to seek further support to ensure their own wellbeing is cared for. It is also a modality they can include alongside client psychoeducation in the form of guided reflective practice.

If you are unsure how to engage in Reflective Practice, please ask a member of our team: membership@ppnetwork.org

What is Risk Assessment?

Risk Assessment describes a continuous process that the practitioner adopts before, during, and after client engagement to help facilitate safe practice.

Risk is present during client engagement and this includes risk to psychological and physical safety for both parties(practitioner and client), and the aim of risk assessment is to identify and mitigate risk. A thorough risk assessment will identify the risk in terms of the likelihood of occurrence and severity and mitigation measures should be designed to either remove the risk or reduce it to safe levels by working with these two areas (i.e. reduction in likelihood and/or severity).

Assessing capacity to function relating to both parties (practitioner and client) is an important part of risk assessment. Within this context functioning refers to an understanding that a client may be functioning well in one domain (e.g. home) but not another (e.g. work). Client functioning is assessed during the intake process (i.e. consultation call, contracting, intake questionnaire, first session, needs analysis, case formulation) and is part of ongoing client interactions. Assessment may include completion of relevant surveys, answering appropriate questions, and observation of client thoughts, feelings, and behaviours over time that may indicate a change in their capacity to function.

It is important that the practitioner includes themselves in their own risk assessment process. For example, how does working with a particular client (or the thought of doing so) make them feel? Identifying risks can be part of a reflective practice and discussed in professional supervision should the need arise.

Questions that are important to address in a risk assessment are:

1. Is the client / practitioner physically safe?
2. Are the client's / practitioner's basic needs met? (e.g. food, shelter, employment or other source of income, healthcare, social support)
3. Is the client / practitioner able to function on a daily basis? (e.g. to work, study, manage household or family tasks, interact with other people, engage in a physical activity suited to their overall health if they so wish)
4. Is the client / practitioner emotionally safe? For example, are they able to recognise and manage stress or emotional / mental adversity, and do they have the ability to advocate for themselves to deal with this in a productive way? (reword)

Having a Risk Assessment process is important for the following reasons:

To communicate to the client that the practitioner is committed to a safe and ethical practice and that they have put in place active steps to ensure that client and practitioner safety remains a core component of practice at all times. It is also an opportunity to discuss with the client topics related to their physical and mental health that may exceed the practitioner's scope of practice and provide a basis for appropriate referral to a healthcare provider or mental health professional.

The practitioner is reminded that risk is a natural part of practice and should be taken into account at all stages of a client's journey, and that the aim is to reduce or eliminate any risks. Eliminating a risk that is too great to manage may mean it is not possible to proceed with a client enquiry. It may even mean terminating a client contract in exceptional circumstances. Such circumstances should be reflected in the client contract and discussed during contracting.

The above list and descriptions are not exhaustive and the specific risk assessment should be conducted. Risk assessments should consider inherent risks from the perspective of likelihood of occurrence and severity of impact and they should move towards removing risk in the primary instance before moving on to secondary mitigation measures.

If you are unsure how to create a Risk Assessment process, please ask a member of our team: membership@ppnetwork.org

What is Safeguarding?

According to the Social Care Institute for Excellence (SCIE), safeguarding is: "Protecting a person's rights to live in safety and free from abuse and neglect". It is a term and a process used to explicitly denote measures in order to protect the health, wellbeing, and human rights which allow people to live free from forms of abuse, neglect, and harm. Often associated with working with children and vulnerable adults, however it should apply unilaterally.

Safeguarding should form an intrinsic part of your policy, procedure, and practice and it will certainly be part of any ongoing risk assessment. According to the Care Act (2014), good safeguarding policies and procedures should consider prevention, protection, empowerment, proportionality, partnerships, and accountability.

Having a Safeguarding Policy is important for the following reasons:

To communicate to the client that the practitioner (where applicable to their client base) is committed to working in line with national legislation. For example, to promote early intervention in line with the UK Children's Act 2004, or to identify controlling or coercive behaviour in line with the UK Domestic Abuse Act 2021.

The practitioner is reminded that they have an ongoing responsibility to identify any relevant and updated legislation that may be applicable to their specific client base from a safeguarding policy perspective.

If you are unsure how to create a Safeguarding Policy, please ask a member of our team: membership@ppnetwork.org

What are Complaints?

A complaint is a statement, expression or indication that something is unsatisfactory or unacceptable. In the context of professional practice, it refers to the client and practitioner and how they feel or think during the process of mutual engagement.

As a practitioner, if you follow the suggested guidelines and modalities, complaints should be infrequent. However, complaints do occur from time to time, particularly if your practice is long-lived and you are continually growing as a practitioner. It is therefore important to understand how to receive and manage complaints in a way that facilitates learning and development, and in a way that is safe for the client and yourself.

Having a Complaints Policy is important for the following reasons:

To communicate to the client that the practitioner is committed to listening to and receiving client feedback that can help to improve their practice.

The practitioner is reminded that listening to and receiving feedback from clients is part of practice and may contribute to practitioner growth.

If you are unsure how to create a Complaints Policy, please ask a member of our team: membership@ppnetwork.org

Further Guidance

If you need any points in this document clarifying or require support in translating this document into practice, please contact: membership@ppnetwork.org

Please also refer to the below documents for further guidance on practice.

- **PPG Professional Guidelines for Positive Psychology Practitioners** – this document includes the definition of key terms and references for practicing Positive Psychology and a Code of Ethics that includes subjects such as client confidentiality, maintenance of client records, resilience, and wellbeing, all of which help to increase the likelihood of safer practices.

- **PPG Community of Practice Guidance** – this document covers the basics of setting up a Community of Practice (COP) where Positive Psychology Practitioners come together to support each other. Given the reflective nature of COPs, and their encouragement of ongoing CPD, such a community can help to increase the likelihood of safer practices.