

ZERO TOLERANCE POLICY

Clinical Psychology & Employee Wellbeing Practice

1. Introduction and Purpose

This Zero Tolerance Policy establishes our unwavering commitment to maintaining the highest standards of professional conduct, client safety, and workplace respect within our clinical psychology and employee wellbeing practice. Given the vulnerable nature of our client population and the trust placed in our services, certain behaviours are absolutely unacceptable and will result in immediate disciplinary action, up to and including summary dismissal.

This policy protects clients, colleagues, and the integrity of our professional practice while ensuring compliance with legal obligations and professional standards governing mental health services in the UK.

Our Commitment: We are committed to providing a safe, respectful, and professional environment for all clients, employees, and visitors. We will not tolerate any behaviour that compromises safety, dignity, professional integrity, or the therapeutic relationship.

2. Scope and Application

This policy applies to:

- All employees (permanent, temporary, contract, and agency staff)
- Clinical psychologists, therapists, and counsellors
- Administrative and support personnel
- Management and supervisory staff
- Students, trainees, and volunteers
- All work-related activities, including off-site visits, training events, and professional gatherings

Professional Context: Our practice operates within the framework of multiple professional bodies including HCPC, BPS, BACP, and UKCP. This policy aligns with and reinforces the ethical standards required by these organisations.

3. Zero Tolerance Behaviours

3.1 Client Safety and Professional Boundaries

Prohibited Behaviours - Immediate Dismissal:

Sexual Misconduct:

- Any sexual contact or relationship with current clients
- Sexual harassment of clients through verbal, physical, or written communication
- Inappropriate sexual comments, suggestions, or behaviour
- Viewing, sharing, or creating sexual content during work hours
- Exploitation of the therapeutic relationship for sexual purposes

Professional Boundary Violations:

- Dual relationships that compromise professional judgment
- Accepting inappropriate gifts or benefits from clients
- Socialising with clients outside the therapeutic context
- Sharing personal problems or seeking emotional support from clients
- Using client information for personal gain

Abuse of Vulnerable Adults:

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- Physical, emotional, psychological, or financial abuse
- Neglect or deliberate failure to provide appropriate care
- Intimidation, coercion, or manipulation of clients
- Discrimination based on protected characteristics
- Failure to report suspected abuse of vulnerable clients

3.2 Confidentiality and Data Protection

Prohibited Behaviours - Immediate Dismissal:

Breach of Confidentiality:

- Unauthorised disclosure of client information
- Sharing client details with unauthorised persons
- Discussing clients in inappropriate settings
- Accessing client records without legitimate purpose
- Failure to secure confidential information

Data Protection Violations:

- Unauthorised access to electronic systems or records
- Theft or misuse of personal data
- Sharing login credentials or passwords
- Removing confidential documents without authorisation
- Failing to report data breaches immediately

3.3 Workplace Violence and Harassment

Prohibited Behaviours - Immediate Dismissal:

Physical Violence:

- Any form of physical assault or battery
- Threatening behaviour or intimidation
- Throwing objects or aggressive gestures
- Damage to property in anger
- Bringing weapons onto practice premises

Harassment and Bullying:

- Persistent unwanted attention or communication
- Behaviour causing distress, humiliation, or intimidation
- Cyber-bullying or online harassment
- Discrimination based on protected characteristics
- Creating a hostile work environment

Sexual Harassment:

- Unwanted sexual advances or propositions
- Sexual comments, jokes, or innuendo
- Display of sexual material or images
- Unwanted physical contact of a sexual nature
- Quid pro quo harassment

3.4 Substance Abuse

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Prohibited Behaviours - Immediate Dismissal:

Alcohol and Drug Use:

- Being under the influence of alcohol during work hours
- Using illegal drugs on practice premises or during work
- Attending client sessions while impaired
- Bringing alcohol or illegal substances to work
- Refusing drug or alcohol testing when required

Prescription Drug Misuse:

- Using prescription medications not prescribed to you
- Working while impaired by prescription medications
- Sharing or selling prescription medications
- Failure to declare medication that may impair performance

3.5 Criminal Behaviour

Prohibited Behaviours - Immediate Dismissal:

Theft and Fraud:

- Theft of practice property, client belongings, or colleague possessions
- Fraudulent claims for expenses, time, or qualifications
- Misuse of practice credit cards or financial resources
- Falsification of records or documentation
- Accepting bribes or kickbacks

Criminal Activity:

- Commission of any criminal offense during work hours
- Criminal behaviour that affects professional registration
- Failure to disclose relevant criminal convictions
- Money laundering or financial crime
- Offenses against vulnerable persons

3.6 Professional Integrity

Prohibited Behaviours - Immediate Dismissal:

Professional Misconduct:

- Practicing outside scope of competence without supervision
- Falsifying professional qualifications or experience
- Failure to maintain professional registration
- Serious breach of professional codes of conduct
- Plagiarism or academic dishonesty

Fitness to Practice Issues:

- Refusing to participate in competency assessments
- Continuing to practice when unfit due to health issues
- Failure to engage with professional development requirements
- Serious clinical negligence or malpractice

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4. Reporting and Response Procedures

4.1 Immediate Reporting Requirements

Who Must Report:

- All employees witnessing zero tolerance behaviours
- Managers receiving reports of such behaviours
- Anyone with knowledge of potential violations

Reporting Channels:

- Direct supervisor or line manager
- HR Department
- Clinical Director
- Anonymous whistleblowing hotline: 020 3494 4111
- External safeguarding authorities (where required)

Timeline:

- Immediate reporting required (within 24 hours)
- Written follow-up within 48 hours
- No delay permitted due to severity of behaviours

4.2 Initial Response Protocol

Immediate Actions:

- Ensure client and staff safety
- Remove individual from client contact if necessary
- Secure evidence and documentation
- Notify senior management immediately
- Consider suspension pending investigation
- Contact emergency services if required

Documentation:

- Incident report within 24 hours
- Witness statements collected
- Evidence preserved and secured
- Timeline of events recorded
- All actions taken documented

4.3 Investigation Process

Rapid Investigation:

- Senior manager appointed as investigator
- Investigation commenced within 48 hours
- External expertise sought where appropriate
- Professional bodies notified if required
- Police involvement where criminal behaviour suspected

Due Process:

- Fair investigation despite zero tolerance stance

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- Employee right to representation maintained
- Evidence gathering and witness interviews
- Consideration of all relevant factors
- Written investigation report

5. Consequences and Sanctions

5.1 Summary Dismissal

Immediate Termination:

- Dismissal without notice for gross misconduct
- No payment in lieu of notice
- Immediate removal from premises
- Return of all practice property
- Termination of access to all systems

Professional Consequences:

- Referral to relevant professional bodies
- DBS referral where appropriate
- Insurance company notification
- Reference limitations
- Potential legal action

5.2 Legal and Regulatory Action

External Reporting:

- Police notification for criminal behaviour
- Safeguarding authority reports
- Professional body fitness to practice referrals
- DBS barring referrals
- Regulatory body notifications

Civil Action:

- Recovery of financial losses
- Injunctive relief where appropriate
- Damages for reputational harm
- Professional negligence claims

6. Support and Protection

6.1 Client Protection

Immediate Measures:

- Client safety assessment and protection
- Therapeutic relationship evaluation
- Alternative care arrangements
- Counselling and support services
- Legal advice where appropriate

Ongoing Support:

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- Continued monitoring of client wellbeing
- Additional therapeutic support if needed
- Clear communication about actions taken
- Assistance with complaints procedures

6.2 Whistleblower Protection

Legal Protection:

- Public Interest Disclosure Act 1998 compliance
- Protection from detriment or dismissal
- Anonymous reporting options
- External reporting channels
- Support and guidance available

Confidentiality:

- Identity protection where possible
- Secure reporting mechanisms
- Limited disclosure protocols
- Retaliation prevention measures

6.3 Staff Support

Affected Colleagues:

- Counselling and support services
- Debriefing sessions
- Workload adjustments
- Team support meetings
- Professional development opportunities

7. Prevention and Training

7.1 Prevention Strategies

Clear Expectations:

- Comprehensive induction training
- Regular policy reminders
- Professional standards training
- Ethical decision-making workshops
- Boundary awareness sessions

Monitoring Systems:

- Regular supervision
- Performance monitoring
- Client feedback systems
- Peer observation
- Annual competency reviews

7.2 Training Requirements

Mandatory Training:

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- Professional boundaries and ethics
- Safeguarding vulnerable adults
- Equality and diversity
- Data protection and confidentiality
- Conflict resolution

Ongoing Development:

- Annual refresher training
- Case study discussions
- Ethical dilemma workshops
- Professional development planning
- Peer learning opportunities

8. Special Considerations

8.1 Mental Health and Wellbeing

Employee Wellbeing:

- Recognition that mental health issues may contribute to behaviour
- Distinction between explanation and excuse
- Support for seeking help before problems escalate
- Reasonable adjustments where appropriate
- Occupational health referrals

Fitness to Practice:

- Regular health assessments for clinical staff
- Self-reporting requirements for health issues
- Support for maintaining professional standards
- Return to work protocols
- Ongoing monitoring arrangements

8.2 Cultural and Religious Considerations

Respectful Approach:

- Cultural sensitivity in investigations
- Religious accommodation where appropriate
- Diverse investigation panels
- Cultural competency training
- Community liaison where relevant

9. Review and Appeals

9.1 Internal Review

Limited Appeal Rights:

- Appeals only on procedural grounds
- No appeal against zero tolerance principle
- Senior panel review
- External legal advice
- Final decision authority

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9.2 External Review

Professional Body Procedures:

- Parallel professional investigations
- Cooperation with external inquiries
- Sharing of relevant information
- Professional standards coordination

10. Communication and Implementation

10.1 Policy Communication

All Staff Awareness:

- Mandatory policy briefings
- Written acknowledgment required
- Regular reminders and updates
- Integration into supervision
- Public display of key principles

10.2 Client Information

Transparency:

- Clear information about standards expected
- Complaints procedure information
- Rights and protections explained
- Regular communication of commitment
- Easy reporting mechanisms

11. Legal Compliance

11.1 Employment Law

Fair Process:

- Natural justice principles maintained
- Right to representation preserved
- Proper investigation procedures
- Evidence-based decisions
- Proportionate responses

11.2 Professional Standards

Regulatory Compliance:

- HCPC Standards alignment
- BPS Code of Ethics adherence
- Professional body cooperation
- Fitness to practice coordination
- Continuing education requirements

12. Monitoring and Review

12.1 Policy Effectiveness

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Regular Assessment:

- Incident analysis and trends
- Policy effectiveness review
- Staff feedback collection
- Client safety outcomes
- Professional standard maintenance

12.2 Continuous Improvement

Learning and Development:

- Case study development
- Best practice sharing
- Policy refinement
- Training enhancement
- Prevention strategy improvement

13. Contact Information and Resources

Internal Contacts:

- Clinical Director: Amy Stoddard-Ajayi
- Safeguarding Lead: Sabina Challenger
- Whistleblowing Hotline: 020 3494 4111

External Contacts:

- HCPC: 0300 500 6184
- BPS: 0116 254 9568
- Police: 999 (emergency) / 101 (non-emergency)
- ACAS: 0300 123 1100

Document Control:

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- **Approved by:** Amy Stoddard-Ajayi, Clinical Director, CEO and Founder
- **Board Approval:** 07/07/2025

Employee Acknowledgment Required: All employees must read, understand, and sign acknowledgment of this policy within 30 days of issue or employment commencement.

This policy reflects our absolute commitment to client safety, professional integrity, and workplace respect. There are no exceptions to these standards.