



Partner Policy: Waiver

Introduction

On occasion a participant will, towards the end of their counselling contract with the EAP, express the need/wish to continue seeing the counsellor privately. WPO offer a short-term counselling service and do not knowingly offer EAP sessions as a prerequisite to a longer-term relationship. Consequently, participants are only referred to EAP sessions for counselling on the understanding that the work can be completed in the number of sessions available under their benefit. In order to reinforce the participant's expectations that they are being referred to a short-term intervention, participants are informed during the engagement process that they will not be able to continue seeing the counsellor to whom they are referred once their EAP counselling has come to a close. WPO will never refer to EAP sessions on the understanding that the participant will need more sessions than are included in their benefit and that the participant will fund these ongoing sessions themselves.

Policy

WPO does not encourage participants to engage privately with a counsellor they have been attending through the EAP Service. There are occasions however when a participant reveals something during their counselling that they did not mention during their initial conversation with the EAP; an issue that does require a longer-term intervention than originally thought and in these circumstances a waiver can be agreed whereby the participant can continue to meet with the counsellor to whom they have been referred for EAP sessions on a private basis if they so wish. The waiver is signed by both the counsellor and the participant and hands clinical responsibility for the work over to the counsellor in their private practice from that moment forward. The EAP will no longer be involved.

When a participant does request that a waiver be agreed, an EAP case manager will review all other options with them and request that they consider these options fully before going ahead and engaging privately with the counsellor requested. However, ultimately, it is the participant's choice whether they wish to continue privately.

The EAP recommends (but does not enforce) a gap (of 4 to 6 weeks) between the closure of the EAP counselling and the private arrangement commencing. This is to allow the impact of the EAP work to settle and be processed before further work begins and gives the participant the opportunity to consider whether this is really the course they wish to take. In the interest of clinical appropriateness and safety this gap will not be recommended if the participant presents in a vulnerable state.

Waivers are not required when a gap of 6 months or more has elapsed between the final EAP session held between the counsellor and the participant and the participant's request to continue privately.

Waivers can be agreed with internal partner counsellors who have provided EAP sessions (either in-person or via telephone/video) to a participant, providing the counsellor is credentialed with the partner service.

Clinical Practice

- EAP counsellors understand that they cannot see a participant privately, without EAP consent, once the EAP authorised sessions have completed. If the EAP becomes aware that an EAP counsellor has continued with a participant without seeking a waiver within 6 months of the EAP sessions coming to an end a formal complaint will be raised against the counsellor who may be removed from access to WPO Participants.
- Counsellors must close their EAP counselling case and return any feedback to the EAP before engaging in their private work with the participant. This is to ensure the documentation of the EAP counselling intervention is not contaminated by information provided during further (non-EAP) sessions.
- Participants referred to Transitional Support may wish to continue privately with the clinician who provided the transitional session(s). This request will be subject to the Waiver Policy and only declined if the clinician refuses the case.

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: no changes to policy. Document updated in line with current naming conventions.