Catharsis Quality Framework

At Catharsis we are committed to providing therapeutic services that are tailored to the needs of a diverse range of clients. Our skilled therapists and versatile approach to creative psychotherapy allows full engagement at all levels.

Catharsis provides support services to children, young people and adults who require creative arts and other psychotherapies. We also provide Clinical Supervision to other professionals, as well as training and creative workshops. The quality of our service is important to us and as such we have a Quality Framework. We are able to assess our delivery, annually review our progress and put in place any relevant actions required to continue to improve and meet the needs of our clients.

Quality factors we consider in assessing our effectiveness include:

Business / contracts:

- Our service delivery is continually reviewed; customer views are sought and analysed.
- A record of compliments and complaints is maintained and reviewed
- An annual business plan is developed and reviewed including an Action plan, which is reviewed annually.
- Growth targets are set and reviewed annually
- Exit surveys are completed at the end of contracts
- Training evaluation forms are requested of all individuals in receipt of training delivered by Catharsis
- Independent quality review by an external consultant or an independent evaluation completed by Higher Education Institute may be considered if deemed appropriate

Staff:

- Catharsis has a team of highly professional therapists operating within the organisational ethos.
- All Arts therapists are governed by the HCPC (Health Care Professions Council) and are members of the governing body particular to their specialism (i.e. BADth British Association of Dramatherapists). In order to achieve HCPC status therapists are monitored in terms of education and training, character, health, standards of proficiency, continuing professional development, conduct, performance and ethics.
- All Integrative Psychotherapists are required to work in accordance with the ethical framework set out by BACP (British Association of Psychotherapists) or UKCP (United Kingdom Council of Psychotherapists)
- All therapists have been selected as a result of an application and interview process; they must come with relevant qualification, registration, clinical supervision and insurance. 2 positive references are sought prior to induction.
- Trainee therapists on placement with Catharsis are provided with internal clinical supervision or a practice educator – as well as a placement manager, in order that they are supported to work safely and within the ethos of Catharsis
- All staff and trainees are asked for feedback regarding their experience of Catharsis and are asked to contribute to service development and improving practice.
- All therapists receive external clinical supervision; discussions regarding clients and best practice enable the most appropriate interventions to take place
- All staff have open access to the Catharsis Senior Management Team in order to discuss clients, safeguarding and expected processes.
- The frequency of 1:1 Supervision will depend on experience and need, but annual reviews are a minimum. 1:1s include the identification of agreed actions to improve service delivery and practice. Safeguarding and training needs are also discussed

and recorded.

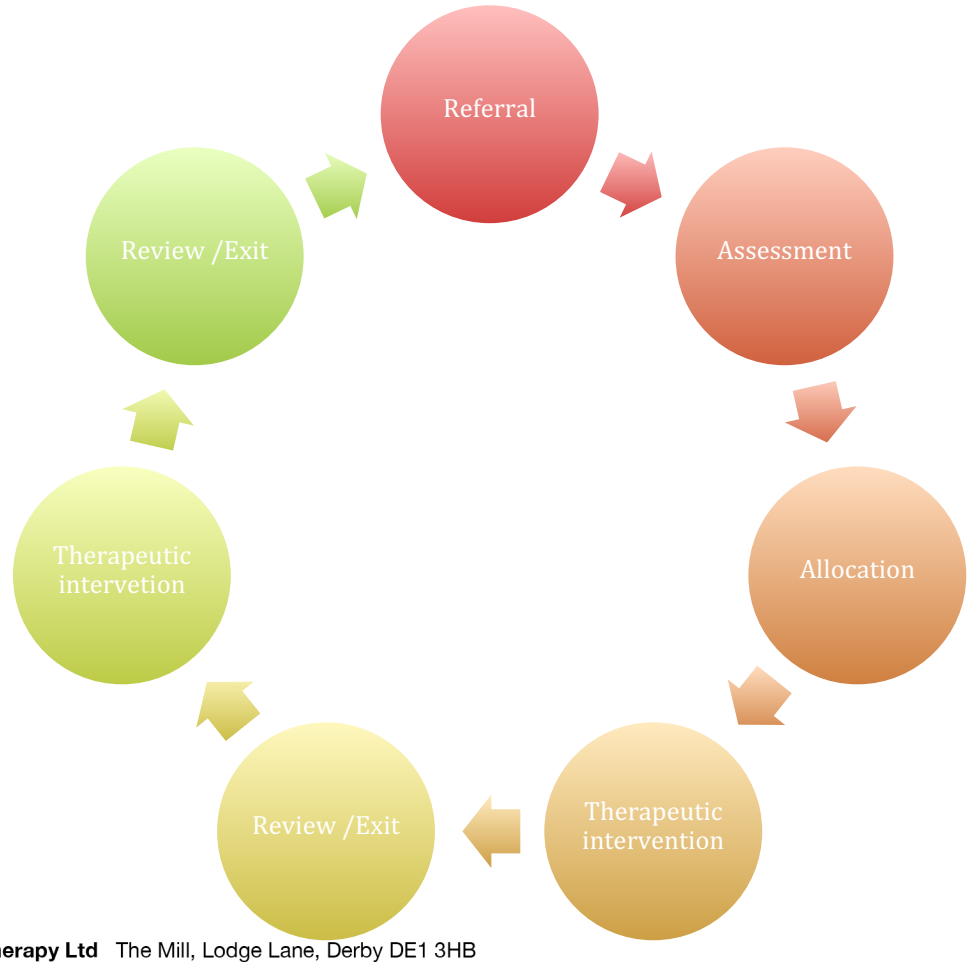
- The Senior Management Team reviews 1:1 supervision notes to identify areas for team / business development.
- Service development and best practice is discussed openly within team meetings and shared by email
- Catharsis are committed to anti-discriminatory practice (see **Equality and Diversity Policy for more detail)**
- Exit interviews are completed when staff leave Catharsis
- An annual programme of training / workshops and CPD opportunities is offered to therapists to increase skills and effective ways of working

Clients:

- Clients are encouraged to complete an evaluation form and give feedback.
- Clients are able to change their therapist / Clinical Supervisor if they feel the fit is not right
- All clients have access to a compliments and complaints procedure.
- Data analysis of therapeutic impacts takes places with all clients

At Catharsis we believe in a lean approach to service planning, delivery and management. We aim to demonstrate strong leadership and proportionate response to required change. Our processes are in line with our business model. Appropriate quality checks are made throughout our workflow; from referral to client exit. In addition to this, compliance with statutory duties and reporting processes are required throughout; including safeguarding procedures for children, young people and vulnerable adults.

Work Flow



At each review stage of this workflow, we check progress and regularly seek client satisfaction; this can be done in a number of ways dependent upon the client's learning needs.

We have a well-established use of evaluation and assessment tools; CGAS (Children's Global Assessment Scores) being used routinely for all clients under 18yrs. C-GAS is a numeric scale used by mental health clinicians to rate general functioning. It is an assessment tool based on both the therapist's assessment of a client and information taken from parents or carers, the referrer and involved agencies, including schools. Whilst CGAS scoring is subjective, it's use is regularly reviewed, and best practice discussed within the Catharsis team in order to ensure some consistency. Other assessment tools such as Goal Based Outcomes, CORE and Strength and Difficulty Questionnaires may also be used as appropriate.

At each review stage we seek feedback from the client and the referrer with regards to the intervention and progress on outcome / focused goals. With regards to our work with children and Young People, therapists regularly liaise with carers, school staff and key workers in order to gain feedback on progress and impacts outside of therapy.

Therapists can provide progress / review reports if relevant to the support being offered. These, and End Evaluation reports, are deemed a good way to share progress towards therapy goals and make recommendations for the ongoing support of clients to a wider network of professionals and / or parents and carers. Gate keeping of reports is encouraged, in order that all staff writing them achieve a consistent standard.

Data collection of therapeutic impact takes place at the end of therapy and is amalgamated on an annual basis. Through data analysis, patterns are identified in order to develop and improve service provision for the future.

Review

Implementation / Review date	**Reviewers**
August 2025	Hannah Robertson
Next Review date	Keren Adler
August 2026	