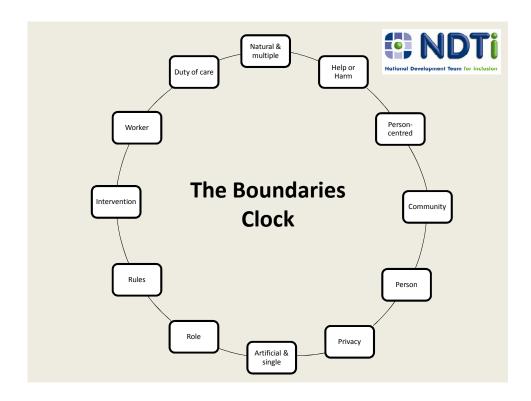


The Boundaries Clock and Peer Volunteers

Beverley Clay¹ with Peter Bates²

Overview

The *Boundaries Clock* was introduced in a previous paper³ to bring together the triple imperative to safeguard vulnerable people, maintain professional boundaries and advance social inclusion. It does not provide easy answers, but rather provides a systematic way to consider the issues and arrive at a defensible position. The initial paper is here followed up with one of a series of short papers⁴ that apply the *Boundaries Clock* in given situations, thus demonstrating its utility, and assisting readers to develop sufficient fluency to apply the approach to new situations.



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³ Bates P. 'Thinking about professional boundaries in an inclusive society', chapter 2 <u>in</u> Gilbert P (ed) (2010) *The Value of Everything* Lyme Regis: Russell House Publishing.

⁴ Further 'The *Boundaries Clock* and....' papers include timebanks, a Community Circle, chaplaincy and L'Arche, and they can all be found at <u>http://www.ndti.org.uk/who-were-concerned-with/mental-health/professional-boundaries-safeguarding-and-inclusion/</u>.

Recent years have seen a substantial increase in the number of people volunteering in mental health services as Peer Volunteers (PVs). Essential qualifications for the role include personal, lived experience of mental health problems and willingness to share this with the people that they support. Part of the goal is to stimulate all paid and volunteer workers, whether they have personal experience of using mental health services or not, to interact with the people they support with personal warmth, as it 'can be frustrating and demotivating to work with [staff] who hide behind organisational bureaucracy or their professional role, or who seem personally distant or disinterested.⁵ In contrast, being personally engaged through emphasising shared humanity is closely tied to the essential shared capabilities of all mental health staff⁶.

There are many opinions about receiving a service and volunteering within the same environment. Two possible arrangements would be first, for people who are in receipt of a service to volunteer to lead a *group* activity within the service from which they receive their primary support, or second, for volunteers to support peers in an activity on a *one to one* basis within that same service.

Richmond Fellowship (RF) is a voluntary sector organisation that provides residential, day and vocational support to 10,000 people with mental health issues across the whole of England. This paper explores the reasons behind RF's decision to invite Peer Volunteers to lead group activities in the same service that the volunteer uses, and generally to encourage peer volunteers who are operating on a one to one basis to build these relationships with people using a different team.

In RF we have, for the moment, decided that people who volunteer to support peers on a one to one basis can still receive support from an RF service, but must offer that peer support in a different service from the one they are utilising. This is an area that is still being explored within RF - we are on a journey of discovery and so the learning is still taking place.

One of the real difficulties in volunteering in a service where a person is receiving their primary support is the potential conflict of the volunteer role versus the client role. Two questions that need to be explored within the staff team and with the volunteer are; can a person simultaneously fulfil both roles? If so, what are the safeguards that need to be put in place?

Achieving success requires some organisational direction as well as a personcentred approach. There must be a clear understanding worked out between the person receiving the service and the service providers about what will happen in the event that the person becomes unwell, both in terms of the volunteer role and any

⁵ Hutchison, C. Using self to develop recovery focused relationships. Module 2 <u>in</u> Forrest S & Bradstreet S (2008) *Realising Recovery learning materials* Scottish Recovery Network and NHS Education for Scotland. Page 38.

⁶ NHS University (2005) *The ten essential shared capabilities for mental health practice: Learning materials.* London: NHS University.

support needs they may have. The relationships with everyone involved in the service also need to be explored, as the Peer Volunteer has two different roles. We have found that it is essential for effective working to identify the person's primary role in this particular space at this particular time, and then to think through the implications of this decision, and what would happen if this needed to change.

In RF we have found that the impact of engaging PVs in the same service that the person uses differs from place to place. In some services this works well, in others, not so well. Understanding what makes the difference is not easy to decipher. Sometimes it can cause conflict in roles or relationships between the PV, paid staff and people using the service.

For this reason, we have used *Boundaries Clock* in order to structure our discussions about the best way forward.

In responding to the questions on the Boundaries Clock there has been a collaborative approach that has drawn together the views of people within RF on the front line, senior managers and a review of organisational policies. The responses set out below are not intended to give the impression that RF has "got it covered" but rather they reveal that there are some good things going on in some places and there is work that still needs to be done. We would like to thank everyone in RF who participated in discussions and acknowledge that lots of questions remain unanswered.

The Boundaries Clock

Six pairs of competing priorities are set in opposition to one another to form the twelvepoint *Boundary Clock*⁷. Individual case studies or service arrangements can then be placed on the clock-face and the twelve vantage points used in turn to generate ideas for shaping practice in an individual situation. As each of the twelve viewpoints is merely an entry point to the clock-face area, the issues that arise inevitably overlap here and there, but the twelve points frame a systematic discussion.

The following paragraphs present the issues in a repeated cycle. First is a one-sentence summary⁸ of the viewpoint. The indented paragraph generates questions for Peer Volunteers from this heading, and the third section shows how Richmond Fellowship has responded to these issues.

⁷ All metaphors have limited value and can carry unwanted freight. This clock has no hands, no power source, no machinery – it is simply a face with 12 observation points. The image of a 12-person jury might work just as well, although it suggests crime and punishment.

⁸ The one sentence summary can also be opened out into a wide range of issues that are broadly associated with each viewpoint. These are available through workshops facilitated by the first author – contact <u>peter.bates@ndti.org.uk</u> for further information.

Applying the Boundaries Clock to Peer Volunteers



Help or Harm. Consider the actual or potential benefit to, or abuse of, people using RF services in the here and now.

As a Peer Volunteer, do you tell your 'mental health story' or your life story? Are there parts of your story that it is not helpful to share? (This might include places where your personal values clash with the person you are supporting). What safeguards are in place to prevent the intimacy of sharing your experiences from becoming inappropriate?

Approach taken by Richmond Fellowship

When acting as a PV there are elements of your life story that it may be appropriate to share. However, if there are unresolved and painful areas of your life, then it would not be appropriate to share these because of the effect this can have upon both you and the person you are speaking to – it can turn the spotlight on you, rather than the person you are seeking to support. It is important that you are self-aware, and this, along with good quality supervision, will help you manage yourself well so that you can appropriately engage with others in your role as Peer Volunteer.

It is of the utmost importance that you understand your personal values and recognise how these values impact on how you work. You must not impose your values on others and must be open to work with others within the framework of their values for the duration of the Peer Volunteering relationship.

Training and team discussions will help you to understand the processes of projection, collusion and transference that can occur and give you an opportunity to explore values and ethics as a means of supporting good working practice. RF as an organisation has an ongoing responsibility to help both paid staff and PVs to understand the power of personal values and how these can impact on interventions. If a conflict of values is a hindrance and cannot be resolved, it is better that this PV relationship come to an end.

Person centred. Adapt your conduct and approach to the people involved and their context.

How do you vary your practice with people in different circumstances? This might include people who use RF services but are not in direct contact with you, who are detained, who live in 24 hour staffed accommodation, or who are volunteers or paid staff.

Approach taken by Richmond Fellowship

As a PV, you will need to discuss with your manager how the particular environment will affect your role and activities, so that people using the service benefit from your contribution, and you can maintain your own well-being.

In addition, you need to be willing to adapt your practice, taking into consideration the needs of the people you are supporting, valuing them as individuals and enabling them to maintain their dignity. Part of the role of a PV is to validate the person's experiences and express a belief in their ability to move forward.

Training, supervision and teamwork provided to paid staff and PVs within RF helps everyone to understand their personal limitations and to realise that it is quite acceptable to be uncertain sometimes and to seek advice when appropriate. Every PV has an identified person within the team who will offer support and help to bring clarity regarding the role of the PV and their relationships with the people they support.



Community. Make the most of the person's informal community relationships.

Personal disclosure can generate high levels of trust that end up displacing other relationships. As a Peer Volunteer, your role is to promote rather than replace the person's informal community relationships. How will you manage your disclosure to achieve this aim?

Approach taken by Richmond Fellowship

As a PV you may share some of the same friendships as the people you support because you live in the same locality and may have used the same community facilities.

However, your role as a PV is primarily for the benefit of the person receiving the service, and this relationship, while based in part on mutuality, has a clear focus on developing an empowerment for others rather than yourself.

Regulatory and professional bodies tend to overlook the activities of PVs and this means that there is less external pressure or rigidity imposed on the role. However, the organisation still has a responsibility and is accountable for keeping everyone safe.

There are some rules that must be kept and these relate specifically to preventing abuse. RF uses induction and team meetings with PVs to encourage honest conversations about practice and to define acceptable and unacceptable conduct. We have found that, whilst conversations with professionals tend to be adversely affected by a power imbalance, the equality that is at the heart of the PV relationship with other people using the service encourages the formation of a mutually accountable community. Peer Volunteers also bring a different range of community knowledge and contacts and a view of confidentiality that adheres to RF policies but is also negotiated with the person being supported. This can be of real value to people who are building a network beyond the mental health service.



Person. Focus on the person and their unique resources, relationships and needs.

How do you judge whether the person will be helped by hearing your story? Are there some people or some circumstances where it would be harmful to others to hear your story?

Approach taken by Richmond Fellowship

Be clear that the reasons for sharing your story are not for your personal benefit, either through 'off-loading' your feelings or ideas, or through imposing your experience onto others. You are not expected to share every aspect of your story with every person you support. The person or group you are supporting should lead and indicate to you whether your story will be of benefit. If you are concerned or unsure whether it is right to share your story, then don't share it. It is of the utmost importance that you use group or individual supervision to discuss how to manage personal disclosure, its impact on you as a volunteer, on people using the service and on the rest of the team.



Privacy. Support the person's right to run their own life, participate in the community and build a home and life free from surveillance or interference.

Are there things that you would not record on the case file? If you came across the person in an informal social situation, under what circumstances would you withdraw to a 'discreet distance'?

Approach taken by Richmond Fellowship

As a Peer Volunteer, it will be made clear to you during induction training and in team meetings the circumstances under which things should be reported. However, the PV role is not designed to make you intrusive or obliged to report every social interaction.

In the event that anything untoward happens in your presence as a PV, or you hear about something that may put people at risk, then you have a responsibility to bring this to the attention of the person being supported, your supervisor, or a paid colleague.

As a PV, whether one to one or in a group situation, you are expected to be honest and sincere with the people you support. The amount of contact that you both have outside of the formal contact must be negotiated between you both and should be shared with your supervisor. You must agree with people receiving the service how you will relate in the event that you meet outside the Service – ranging from no acknowledgement at all, through brief greetings or introductions of others you are with, through to shared participation in community activities. If you agree to be introduced think about how you each want to be introduced to avoid any awkward or embarrassing situations.



Artificial and Single. Keep the relationship between the worker and the person distinctive by following special rules and inhibiting other contact.

Does your life overlap with the person in other ways, apart from in your role as a PV? How do you deal with these overlaps? What is the difference between your role as a PV and that of a friend?

Approach taken by Richmond Fellowship

As a member of your community, overlap is unavoidable. You will inevitably share some of the same community venues and opportunities as the person you are supporting. You may find that you know some of the same people. This is not a problem. It is however, essential to be clear about personal roles and how this contact can affect the more formal PV relationship. People who spend time together and enjoy each others' company are likely to become friends. Both of you need to explore what you want to do if the relationship changes. The nature and quality of the relationship must be understood by colleagues and explored within team discussions and in supervision if required.

It may be necessary to continue the relationship on a friendship basis and end the PV relationship. If the complexity of the relationship becomes difficult to manage then this needs to be discussed so that a good decision can be made and there is clarity for all concerned. Relationships are a part of the conversations that happen on a regular basis about boundaries.



Role. Watch out for setting a precedent and keep a consistent sense of what counts as an appropriate working relationship.

Does a personal disclosure on one occasion create subsequent demands on you? Is this always helpful? What impact does your disclosure have on other members of the staff team or other people using the service?

Approach taken by Richmond Fellowship

Disclosure brings the potential for collusion. It is essential that you make it clear that you work as part of a team and that you adhere to whatever team approach has been agreed. Disclosure can create difficulties especially if other people within the service relate to your story on a practical or emotional basis and some of your colleagues are not aware of your story.

Ideally, you should tell your story from the perspective of an active decision-maker who focuses on strengths and faces the challenges of self discovery and change. If

you have concerns about the possible impact of your disclosure this must be shared and discussed with the team.

Be clear about your reasons for self-disclosure. It must be appropriate to the circumstances and of benefit to the person or group you are supporting and only shared with permission from the hearer. Although disclosure is one of a number of strategies that you use in this relationship, it is not an obligation. Be aware of the potential of leaving yourself vulnerable to the point that you are not managing yourself well or meeting your own needs, such as the need for some time off.

Rules. Apply law and regulation to all people and all relationships at all times to keep things fair.

What does the organisation for which you volunteer say about your selfdisclosure??

Approach taken by Richmond Fellowship

The organisation does not prohibit self-disclosure. Staff are expected to set and enforce explicit and appropriate professional boundaries to minimise the risk of conflict, exploitation or harm in all relationships with people who currently or have previously accessed services and ensure that private or personal interests do not negatively influence decisions.

Whatever is disclosed must be in the best interest of the person being supported within the service.

Always make it clear that you work as part of a team. Seek support from your line manager or colleagues if you have any concerns at all about either what you are thinking of disclosing or the potential impact of the disclosure. Do not disclose if you are unsure. Take your concerns to a team meeting or supervision. Be clear in team meetings about any difficulties you or others encounter as a result of you sharing your story.

Intervention. Make the most of the relationship between the worker and the person.

Are there other ways in which your life might overlap with the person that should be suspended while you are volunteering in a supportive role in order to do a good job?

Approach taken by Richmond Fellowship

It is likely that you will come across people day by day who access services provided by RF because you live in the same locality or have the same interests. There is a balance to be found between your role as a volunteer and you as a citizen in a local community and any interactions that occur as a result of this. You, your supervisor and the person you are supporting must be clear about what space, contacts and activities you are willing to share. Your life doesn't need to be intertwined with the person you are supporting outside of your work as a Peer Volunteer. This is an area that you will find that you need to revisit on a regular basis. How the relationship will work must be discussed in detail to gain clarity for all concerned.



Worker. Value the worker and their unique resources, relationships and needs.

How do use your distinctive experiences to make the way you do the volunteering role unique? Do your working arrangements support you as a Peer Volunteer to have a full life in the community?

Approach taken by Richmond Fellowship

RF enables Peer Volunteers to work flexibly. As a volunteer with lived experience, your experiences impact on who you are and inform what you do. Every person who experiences mental ill health has a different experience. And so this requires you to listen carefully so that you understand the point of view of the person or group that you are supporting. You also need to consider what you say and try to make sure that all you say and do is of benefit to the people you are supporting. If you are unsure about something, check it out with the person.

Duty of Care. Take action, and sometimes even over-ride the person's preferences in order to keep everyone safe.

Under what circumstances would you over-ride the person's preferences and report what you see or hear to a senior person in Richmond Fellowship? Does this include your off-duty time?

Approach taken by Richmond Fellowship

Over-riding a person's preference is not something that should be taken lightly. Richmond Fellowship has clear policies and procedures in place to help you make decisions around safety for staff, volunteers, people who use RF services and the public. Most of the time, you do not have to make this decision alone because there is a manager available either within the Service or On-Call who will be able to discuss an appropriate way forward with you and the person you are supporting.

Reporting to a mental health professional will always be the responsibility of a paid member of staff. Peer Volunteers, like employees, are expected to report any suspicion that the person being supported is being abused or harassed, whether financially, physically, emotionally or sexually, or appears to be at particular risk in terms of their personal safety or the safety of others. In your role as a PV, you will be made aware of any particular concerns that the service and individual is aware of with regard to personal and public safety issues and what actions you are to take while you are out and about. Both you and the person you support will be aware of the process, which can be discussed at regular intervals if needed. If you become aware of an immediate problem regarding the safety of a peer who you support or the public when you are not working for RF, the duty of care continues only in the sense of making the team aware of your concerns.



Natural and Multiple. Use the worker's ordinary humanity,

citizenship and experience of life to engage with the person.

How does it help the person to meet a Peer Volunteer who has had similar experiences to themselves? How do you make the most of this and avoid the pitfalls? Do you seek out a common bond with the person – such as heritage, upbringing, interests, or neighbourhood?

Approach taken by Richmond Fellowship

Meeting a Peer Volunteer with similar experiences validates the person being supported and their life experiences whilst giving them a potential role model and a lived example of recovery and hope that their life also can change. This can lead to improved well-being, hope and discovered potential. The person experiences being listened to by someone who can relate because of similar life experiences.

It is important to avoid collusion, exclusion of others and a dependency on the PV that may occur because of the shared experience.

As a PV, you will be supported within the team to use reflective practice methods, and helped to deal with the possibility that you may be seen as powerful because of your position as a role model to the person. A common bond can be really important for both PVs and the people being supported, although it is important to acknowledge that the meaning of a common bond must be judged by the person being supported in dialogue with the Peer Volunteer. We must not assume that simply because people happen to have the same background, interests or experiences or live in the same neighbourhood, these elements will sufficient to form a bond. Time and care must be taken by both parties to check out the things that are important for them in terms of building a valued relationship.

If the relationship enables the person to take personal responsibility, gives them space and opportunity to lead and to recognise themselves as being the expert in their own lives then it is less likely to lead to dependence.

Conclusion

Completing the Boundaries Clock has been very useful in exploring what actually happens within RF and has helped to identify gaps in our thinking and practice. It has, and continues to be, a catalyst for discussions and development.

The first author works with staff teams and people who access services provided by RF. This piece of work has provided further clarity and prompted questions about her own approach and the support she can offer services as people work together to find a way forward that is empowering and promotes dignity, respect and autonomy, whilst recognising the safeguarding concerns that are raised from time to time.

There are no hard and fast answers from the perspective of either the person accessing a service or the Peer Volunteer. The *Boundaries Clock* has the potential to support paid staff and Peer Volunteers in improving their person-centred working in the context of ever changing service arrangements. Risk, safeguarding and exclusion continue to be areas of concern that can be explored through use of the *Boundaries Clock*.

From an organisational perspective the Boundaries Clock has brought to the fore important questions in all areas of service provision. It is inclusive in application, informs both policy and practice, has the potential to influence approaches to staff training and development and is providing an opportunity for discussions at both senior management and board level.