

# DDPI Governance, Safe Practice and Complaint Procedure

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## 1. What is the Governance for DDPI?

The Dyadic Developmental Psychotherapy Institute (DDPI) is a member organisation. The Governance for membership of DDPI is overseen by a Board of Directors who seek to ensure the DDPI Vision, Mission Statement and Objectives - <https://ddpnetwork.org/ddpi/about-ddpi> - are met by:

- **Effectiveness:** stating the purpose of DDPI clearly and keeping it relevant to present conditions; being explicit about how the objectives are to be met and how we will achieve these; managing and targeting resources effectively.
- **Accountability:** evaluating the effectiveness of our work; responding in a timely, sensitive and rigorous manner to concerns.
- **Standards:** being clear about the standards to which we will work
- **Member involvement:** being open about our arrangements for involving members
- **Transparency:** having a systematic and open process for making appointments to our Board; setting out the role and responsibilities of members of our Board and of our committees.
- **Equality and fairness:** ensuring that our policies and practices do not discriminate unfairly or lead to other forms of unfair treatment (link to diversity statement)

## 2. Safe Practice Statement

DDPI is a member organisation open to individuals and agencies. The criteria for DDPI membership are to be found here - <https://ddpnetwork.org/ddpi/membership/>.

For Safe Practice it is important to note that:

1. DDPI is not a registered professional body. It is mandatory that all members of DDPI are both registered with a relevant professional body in their country of practice and also adhere to their professional body's code of practice, conduct and ethics.
2. The Attestation Form <https://ddpnetwork.org/library/ddpi-attestation-form> - is required to be completed at the start of the DDP Practitioner Practicum and, from then on, every four years as part of renewal of DDP Certification. Members are required to inform DDPI immediately if there is any change to the information in their Attestation Form.

3. All Practitioners certified in DDP are required to have clinical supervision with a designated DDPI-approved Certified DDP Consultant - <https://ddpnetwork.org/ddpi/practitioner-certification-ddp/renewal-practitioner-certification>
4. DDPI cannot accept legal responsibility for the welfare of clients.
5. Any relationship – between DDPI members of whatever standing (Practitioner, Consultant, Trainer) and parents, children, other family members, and practitioners that is deemed to be an abuse of power, exploitative, and/or coercive, is unacceptable and cause for concern.

### 3. Safe Practice and Boundary Issues

#### Boundaries

Whether working as a certified DDPI-approved DDP Practitioner, Consultant or Trainer (hereafter referred to as practitioners), professionals have a mandate for safe practice to support those to whom they are offering DDP therapy, supervision, consultation or training by recognizing and managing boundary crossings. Co-creation of boundaries is of fundamental importance in both DDP practice with families as well as in supervision.

Explicitly stating the boundaries of DDP therapy with each family creates a healthy framework and structure for safety, trust and the core attitude of PACE to develop and be maintained. Boundaries include the nature and purpose of therapy, expectations and goals, confidentiality (including the limits to confidentiality), nature of fees, timing, venue, review, practitioner availability and access, privacy, emergency access/protocols and, ultimately, the ending process including any contact post therapy.

#### Power imbalances and discrimination

Practitioners, supervisors and always need to be sensitive to the actual and potential imbalances of power in therapeutic relationships. DDPI actively encourages Practitioners, Consultants and Trainers to identify and make explicit systemic factors of relative power, privilege and subjugation in therapeutic, supervisory and training relationships along the multiple dimensions of each person's identity. This includes race, age, religion, national origin, citizenship status, socioeconomic status, sexual orientation, gender identity or expression and physical ability.

In order to truly strive for a safe practice, DDPI recognizes the very real historical, cultural and institutionalized roots of racism and other forms of oppression. These often manifest in subtle, unconscious microaggressions (unintentional discrimination against a marginalized group, such as, not limited to, racial and ethnic minority) towards those in therapy, supervision, consultation or training with less relative privilege. DDPI aims to ensure those with more relative privilege take the lead, when appropriate, of healing ruptures resulting from microaggressions or overt acts of discrimination.

#### Dual relationships

A boundary breach that can emerge from relational interventions such as DDP is the issue of dual relationships. Dual relationships refer to any situation where multiple roles exist between a DDP Practitioner and any individual who might be considered to be a

client. (Examples of dual relationships are when the client is also a student, friend, family member, employee or business associate of the DDP Practitioner).

For the purposes of this document, a client includes the parents and caregivers who care for a referred child, as well as the referred child. In some circumstances, other family members or caregivers, if they are included in therapeutic work and /or consultation may be seen as clients.

Dual relationships carry with them the potential to cause a conflict of interest and exploitation of the client/family. There are many examples of a dual relationship in therapeutic work. Not all result in a conflict of interest or an ethical violation but all practitioners should be aware of the potential for harm and should engage in safety discussions with a supervisor and the client. Conflicts of interest are the practitioner's responsibility to be aware of and prevent; clients and families may not foresee the potential for conflicts to cause harm. One factor that makes a dual relationship unethical is the potential or actual abusive use of power, intended or unintended. The practitioner needs to be mindful of their influential positions with all clients (including supervisees, trainees, etc.). There are varying degrees of harm or potential harm that might occur as a result of dual relationships; the negative effects of dual relationships might not be apparent until later in the relationship or even years after the relationship has ended.

Taking a conservative approach is best when the potential for exploitation exists due to power imbalances in therapeutic relationships. Avoiding potentially exploitative boundary breaches and conflicts of interest is always in the client and family's best interest and takes precedence over any other interests. For example, one dual relationship that is always considered harmful is a sexual relationship with a client.

#### **4. Responding to Initial Complaints and Concerns**

(i) It is recommended that DDPI members consult with their designated DDP Consultant to explore any boundary issues, including dual relationships, that arise. The consultant is responsible for helping the member consider anticipated and unanticipated effects of dual relationships and for helping the member consider the potential for negative outcomes. The consultant will encourage the member to use self-reflective skills and feedback; often boundary breaches are not self-evident and may include lapses of reflective capacities. The consultant has the responsibility of weighing with the member the anticipated and unanticipated effects of dual relationships, helping build his or her self-reflective awareness when boundaries become blurred, when he or she is getting close to a dual relationship, or when he or she is crossing the line in the clinical relationship.

(ii) Consulting DDPI's Professional Standards committee. This committee is always willing to provide guidance if desired, but this does not take the place or supersede the advice from your professional regulatory body.

(iii) Other avenues include the member consulting with his or her professional regulatory body and/or insurance provider.

The DDPI member's own professional regulatory bodies will have requirements concerning unethical boundary breaches; not initiating or participating in relationships that transcend the professional relationship is an expectation across all professional regulatory bodies.

In addition, the DDPI Board strongly recommends that DDPI members:

- Do not initiate or participate in dual relationships, that potentially cause a conflict of interest or are exploitative with a client, at any time prior to, during or following termination of therapeutic services. Therapeutic services include parental or caregiver consultation/advice both pre-therapy and post-therapy involving a child, regardless of the time that has passed since therapy occurred involving a child.
- Declare and seek advice in DDP clinical supervision on boundary issues and dual relationships with other DDPI members.

We encourage all practitioners to review ethical expectations regarding what constitutes a dual relationship and to consult the guidance provided by the regulatory bodies and professional organizations to which they are affiliated.

## 5. How Will Complaints and Concerns Be Dealt With?

DDPI members, at the beginning of therapeutic work, should inform the adults (parents/ caregivers and involved professionals) and the children with whom they are working both of their registration body and also how to raise any concerns they may have.

DDPI recommends the following process for raising concerns:

### Step 1

Concerns that members of the public or other professionals have about DDPI members' practice with families or with other professionals should, in the first instance, be raised with the member themselves. If this is not appropriate or possible, the concerns should be raised with the DDPI member at large for that country. If there is no DDPI member at large for the country, the concerns should be raised with the chair of the DDPI Board.

<https://ddpnetwork.org/ddpi/board-directors/>

### Step 2

If the concern cannot be resolved it can be raised with the DDPI members employer (where the member is not self-employed) following the employer's protocol.

### Step 3

Where the DDPI member is self-employed and/or the concern cannot be resolved by Steps 1 and 2 the concern can be raised with the member's registration body following the registration body's protocol.

DDPI members must advise their DDP Renewal Consultant and any DDP Consultants with whom they have supervision of any concerns that have been raised.

The DDPI Board, although it is not a regulatory body, requests that it is informed of any concern that has not been resolved after Step 2. This is done by contacting the Chair of the DDPI Board or a member of the DDPI Professional Standards Committee. Concerns will be dealt with and responded to on an individual basis, with DDP principles at the centre of feedback and decision-making alongside taking necessary action regarding potential or actual unsafe, inappropriate or unprofessional practice.