

Council meeting, 12 May 2011

Psychotherapists and Counsellors Professional Liaison Group (PLG)

Executive summary and recommendations

Introduction

The Psychotherapists and Counsellors PLG was established in light of the 2007 White Paper 'Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century'.

The PLG met a total of 9 times between December 2008 and May 2009 and May 2010 and February 2011 to consider and make recommendations to the Council on the statutory regulation of psychotherapists and counsellors. In summer 2009, a consultation was held on the initial recommendations of the PLG. Following the consultation, the PLG was reconvened from May 2010 with revised terms of reference to undertake further work on the outstanding issues.

The attached sheet outlines the conclusions previously reached by the Council in respect of the terms of reference of the PLG and the recommendations reached by the PLG over the course of its final meetings. The draft standards of proficiency considered at the final PLG meeting and the minutes of the final meeting (approved by the Chair following consultation with members) are also attached.

In February 2011, the Government published the Command Paper 'Enabling excellence' which sets out the direction of Government policy in the area of regulation. This paper outlines that, in future, statutory regulation will only be considered in exceptional circumstances where there is a 'compelling case' and where voluntary registers, such as those maintained by professional bodies and other organisations, are not considered sufficient to manage the risk involved.

In March 2011, in response to a letter from the HPC, Anne Milton, Parliamentary Under Secretary of State for Health confirmed that it was not currently the Government's intention to proceed with the statutory regulation of psychotherapists and counsellors but that the Government would 'keep this under review in light of the experience of assured voluntary registration'.

Decision

This paper is to note; no decision is required.

Background information

- **Psychotherapists and Counsellors PLG workplan, 25 March 2010**

<http://www.hpc-uk.org/aboutus/committees/archive/index.asp?id=523>
(enclosure 11)

- **Psychotherapists and Counsellors PLG webpage**

<http://www.hpc-uk.org/aboutus/professionalliaisongroups/psychotherapistscounsellors/>

Resource implications

None

Financial implications

None

Appendices

- DRAFT standards of proficiency for psychotherapists and for counsellors (considered at the PLG meeting on 2 February 2011)
- Minutes of the PLG meeting on 2 February 2011 (approved by Chair of the PLG)

Date of paper

3 May 2011

Psychotherapists and counsellors terms of reference and recommendations

Conclusions reached by the HPC Council – December 2009

- A part of the Register should be established for psychotherapists and counsellors.
- Modalities should not be reflected in the structure of the Register.
- The titles 'psychotherapist' and 'counsellor' should be protected.
- The approach to dual registration outlined in the report and conclusions documents should be adopted.
- The inclusion of names in the HPC Register from other eligible registers [voluntary register transfer] should be performed by means of a three stage process as outlined in the conclusions document.
- The transitional 'grandparenting' period should be three years long.

PLG terms of reference (May 2010 to February 2011) and summary of recommendations reached

Structure of the Register (The question of whether the structure of the Register should differentiate between psychotherapists and counsellors).

- The PLG proposed a new structure whereby the Register would separately identify two groups of counsellors at entry – one entering the Register at level 5 on the relevant qualification frameworks (equivalent to a diploma of higher education); the other at level 7 (masters level). This was said to be broadly reflective of service delivery, education and practice; it was concluded that one title cannot accurately span the entire range of practice and therefore this arrangement was more meaningful and reflective of reality. This was agreed by the group with one abstention.¹
- The PLG overall agreed that the Register should additionally differentiate between counsellors entering at level 7 and psychotherapists. There were six members in favour, one against and there were three abstentions.

Children and young people (The question of whether the structure of the Register should differentiate between those qualified to work with children and young people and those qualified to work with adults.)

- Having considered whether there were distinct groups of practitioners which could feasibly be separately identified in the structure of the Register, the PLG specifically considered whether child psychotherapists

¹ Qualification levels used in this document refer to the Qualifications and Credit Framework (QCF) and the Framework of Higher Education Qualifications (FHEQ). These frameworks additionally correspond to levels in the Scottish Credit and Qualifications Framework (SCQF) – for example, a masters level qualification is level 12 on the SCQF.

(who sometimes also use the title 'child and adolescent psychotherapist') should be identified in the Register with a separate protected title. Four members were in favour, three against and there were three abstentions.

The standards of proficiency for psychotherapists and counsellors.

- The draft standards of proficiency produced by members of the PLG – for 'level 5 counsellors', 'level 7 counsellors' and for psychotherapists informed the debate and voting outlined in relation to the structure of the Register. Overall it was agreed that further work to develop the draft standards of proficiency would be needed in any event.

The threshold level(s) of qualification for entry to the Register

- This area is linked to the standards of proficiency and the structure of the Register.
- The PLG agreed, with one abstention, that the first entry point for counsellors to the Register should be level 5 (rather than level 4).
- The remaining decisions regarding whether counsellors entering at level 7 and psychotherapists should be differentiated are outlined on the previous page.

Proposed generic Standards of Proficiency for all counsellors are in black font. The draft standards for level 5 counsellors are in blue. The draft standards for level 7 counsellors are in red.

Standards of Proficiency – Counsellor

A registrant counsellor must:

1. Be able to practise safely and effectively within their scope of practice

- i. Be able to contract clearly and appropriately with the client
- ii. Be able to establish, manage and end therapeutic relationships with clients
- iii. Be able to take account of the client's capacity for self-determination and ability to reflect on his / her psychological functioning and refer as necessary
- iv. Be able to recognise when further intervention is inappropriate or unlikely to be helpful and make referrals when appropriate
- v. Be able to assess and manage levels of potential risk for the client and others and take appropriate action
- vi. Be able to recognise that specialised knowledge, skills and specific ethical and legal considerations around safeguarding and child protection are required when undertaking work with children and young people

Level 5 counsellor

- vii. Be able to recognise and work safely with mild to moderate mental health problems, psychological difficulties and obstacles to well-being and make referrals when appropriate

Level 7 counsellor

- viii. Be able to understand and work with the full range of psychological difficulties
- ix. Be able to assess the effectiveness of different theoretical approaches for the client presentation and the appropriateness of psychological therapy and make recommendations based on the range of evidence

2. Be able to practise within the legal and ethical boundaries of their profession

- i. Be able to reflect on and respond appropriately to ethical dilemmas
- ii. Understand the legal and ethical problems commonly faced in therapeutic work and make informed judgements about practice in relation to these

Level 5 counsellor

- iii. Be able to recognise and respond to the dynamics of power and authority in the therapeutic relationship

Level 7 counsellor

- iv. Be able to manage and respond to ethical situations arising from work with clients with complex presentations
- v. Be able to critically analyse, interpret and manage the dynamics of power and authority in therapeutic contexts

3. Be able to maintain fitness to practice

- i. Understand the importance of maintaining own health and psychological well-being
- ii. Be able to recognise own disturbance or distress and develop appropriate self-support and self-care strategies and ensure own personal needs are met outside the therapeutic relationship
- iii. Be able to identify and implement an appropriate programme for continuing professional development

4. Be able to practise as an autonomous professional, exercising their own professional judgement

- i. Be able to appraise the client's ability to benefit from the type of counselling offered
- ii. Be able to use counselling supervision to support and enhance professional judgement

Level 5 counsellor

- iii. Be able to use a coherent assessment strategy to assess clients and their needs

Level 7 counsellor

- iv. Be able to use a coherent assessment strategy to assess clients and their needs which takes into account other frameworks for understanding mental ill-health and psychopathology
- v. Be able to make clinical judgements on complex presentations in the absence of complete information
- vi. Be able to use existing knowledge creatively in response to clients presentations and adapt theory to practice on a case by case basis
- vii. Be able to make independent judgements on the appropriate therapeutic work and to continually review these judgements in the light of new evidence, adjusting the work accordingly

5. Be able to practise in a non-discriminatory manner

- i. Be able to be aware of and respond appropriately to the effect of own values, beliefs, attitudes and behaviours when working as a counsellor

Level 7 counsellor

- ii. Be able to critically appraise counselling theory and research in relation to new developments and understandings in anti-discriminatory practice
- iii. Be able to integrate a clear understanding of anti-discriminatory practice with counselling theory and apply this to client circumstances, reflecting on the counsellor's own position in relation to the work being undertaken

6. Be aware of the impact of culture, equality and diversity on practice

- i. Be able to personalise practice to take account of the circumstances of clients and their needs in relation to issues of diversity
- ii. Understand the social and cultural context and their implications for practice

7. Be able to maintain confidentiality

- i. Understand and manage the limits and challenges of confidentiality in counselling work

8. Be able to communicate effectively

- i. Be able to communicate in English to the standard equivalent to level 7 of the International English Testing System with no element below 6.5
- ii. Be able to critically reflect on and manage issues relating to working with third party or others present
- iii. Be able to communicate with a wide range of clients in a manner appropriate to individual need, adapting practice as necessary to individual circumstances

9. Be able to work appropriately with others

- i. Be able to engage and work collaboratively with other relevant professionals to ensure safe and effective practice

Level 5 counsellor

- ii. Be able to use appropriate formulations with regard to mild to moderate mental health problems, psychological difficulties and obstacles to well-being when communicating with others about the client and the therapeutic work

Level 7 counsellor

- iii. Be able to use appropriate formulations with regard to the full range of psychological difficulties when communicating with others about the client and the therapeutic work

10. Be able to maintain records appropriately

11. Be able to reflect on and review practice

- i. Be able to demonstrate self-awareness through the use of personal therapy and / or other activities that encourage personal development and reflective practice
- ii. Be able to use and review feedback from counselling supervision, other professionals and clients on the therapeutic process
- iii. Be able to be open and transparent in counselling supervision enabling honest scrutiny of practice

12. Be able to assure the quality of their practice

Level 5 counsellor

- i. Be able to use formal and informal methods of quality assurance to evaluate own practice

Level 7 counsellor

- ii. Be able to monitor and evaluate the quality of practice and contribute to the generation of data for quality assurance and improvement programmes

13. Be able to draw on appropriate knowledge and skills to inform practice

- i. Understand the range of psychological services and interventions available to clients
- ii. Be able to understand and use therapeutic skills and interventions consistent with underpinning coherent theoretical frameworks showing empathy for client experience, needs and aspirations

Level 5 counsellor

- iii. Be able to consistently integrate a coherent and theoretically informed body of knowledge into practice
- iv. Be able to recognise and work therapeutically with mild to moderate mental health problems, psychological difficulties and obstacles to well-being
- v. Be able to draw on the bodies of knowledge identified in Standard 14 to inform practice

- vi. Be able to use relevant research findings to inform practice

Level 7 counsellor

- vii. Be able to reflect on complex and sometimes contradictory information in order to clearly articulate and work therapeutically with the full range of psychological difficulties and their origins
- viii. Be able to demonstrate critical understanding of theoretical frameworks and test these against the demands of clinical practice
- ix. Understand, critically analyse and evaluate the bodies of knowledge identified in Standard 14 to inform practice
- x. Be able to apply research findings to the critical evaluation of practice
- xi. Be able to critically evaluate a range of research methodologies
- xii. Be able to conduct own research using appropriate methodology

14. Understand key concepts of the bodies of knowledge which are relevant to their profession

- i. Understand the inter-relationship between physical and psychological health
- ii. Understand the common factors that contribute to therapeutic change
- iii. Understand models and purposes of counselling supervision

Level 5 counsellor

- iv. Understand theories on the origins and process of mild to moderate mental health problems, psychological difficulties and obstacles to well-being
- v. Understand a coherent theoretical framework for practice with mild to moderate mental health problems, psychological difficulties and obstacles to well-being which includes:
 - theories of the therapeutic relationship and the therapeutic process
 - understanding of relationships across the lifespan
 - theories of human development
 - life transitions and developmental challenges
 - theories of therapeutic change
 - relevant research findings

Level 7 counsellor

- vi. Understand theories on the origins and process of the full range of psychological difficulties and their impact on psychological health and well-being

vii. Understand, critically evaluate and analyse a coherent theoretical framework for practice with the full range of psychological difficulties which includes:

- theories of the therapeutic relationship and the therapeutic process
- understanding of relationships across the lifespan
- theories of human development
- life transitions and developmental challenges
- theories of therapeutic change
- relevant research findings
- individual and social conceptualisations of psychopathology and psychological health and well-being

15. Be able to establish and maintain a safe practice environment

DRAFT

Draft psychotherapy standards of proficiency version 14 January 2011

1	Be able to practice safely and effectively within their scope of practice
1.1	<p>Be able to demonstrate a range of well-described skills that are derived from systematic training in theoretically well-documented psychotherapeutic model(s), and which have clear links to the body or bodies of knowledge that underpin the model(s)</p> <p>Or possibly : Be able to demonstrate a range of applications of theoretical and clinical practice knowledge, skills and understanding, that are derived from systematic training in theoretically well-documented psychotherapeutic model(s), and which have clear links to the body or bodies of knowledge that underpin the model(s)</p>
1.2	Be able to understand and work with a range of mental health, psychological and psychosocial disorders and their presentations; be able to intervene effectively, and be able to make appropriate referrals where necessary
1.3	Be able to establish, build, maintain and end a therapeutic relationship with a client
1.4	Be able to apply a planned sequence and progression of theoretically-determined and clinically-informed activities which address the processes which underpin serious and enduring disorder or distress of sufficient severity to interfere with the client's psychosocial abilities, their wellbeing, or their ability to function
1.5	<p>Be able to identify and incorporate into their therapeutic work experiences from an individual's past which have significantly influenced the client's current state in line with theoretically well-documented psychotherapeutic model(s)</p> <p>Or possibly: Be able to identify and incorporate into their therapeutic work an understanding of the range of experiences from an individual's developmental and / or recent past which have significantly influenced the client's current state in line with theoretically well-documented psychotherapeutic model(s)</p>
1.6	Be able to demonstrate an understanding of the range of implications and effects of the use of medicines to treat psychological, psychosocial and emotional conditions in clients; be able to process these implications and effects as part of the therapeutic relationship appropriate to model(s) and approach

Draft psychotherapy standards of proficiency version 14 January 2011

2	Be able to practice within the legal and ethical boundaries of the profession
2.1	Be able to draw on knowledge of relevant codes of professional and ethical conduct and practice in order to apply the principles embodied in these codes to all aspects of the work being undertaken Or possibly: Be able to manage the process of drawing on the statutory and any other legal and ethical codes that may apply and be able to manage the complexity that may arise from this aspect of practice
2.2	Be able to understand the need to respect, and uphold, the rights, dignity, values and autonomy of clients including their role in the therapeutic process
2.3	Be able to recognise and manage the dynamics of power and authority
2.4	Be able to understand their specific professional therapeutic role in a range of different settings and services
2.5	Be able to understand the importance of obtaining informed consent and to obtain this from all clients, appropriate to client capacity
2.6	Be able to draw on knowledge of legislation pertinent to the safeguarding of children, young people and vulnerable adults, and hence understand their duty of care in relation to these groups
3	Be able to maintain fitness to practice
3.1	Be able to engage in a process of professionally-recognised continuous professional development relevant to their theoretical model and scope of practice
3.2	Be able to identify and manage their personal involvement in, and contribution to, the processes of therapy
3.3	Be able to recognise and take appropriate action in relation to any adverse impacts of their own distress or disturbance including self-care strategies, or receiving professional help from others such as further clinical supervision and personal therapy
3.4	Understand the need for regular supervision, and be able to make use of this to improve practice in their theoretical approach and enhance contemporary understanding and practice, including with reference to working with clients from specialist groups and /or in specific areas of practice

Draft psychotherapy standards of proficiency version 14 January 2011

4	Be able to practise as an autonomous professional, exercising their own professional judgement
4.1	Be able to draw on their theoretical model(s) to carry out assessments and make formulations in response to a range of client presentations and problems
4.2	Be able to apply theoretical knowledge and understanding in developing explanations and initiating appropriate psychological and psychosocial therapeutic responses to clinical processes.
4.3	Be able to apply their model(s) of therapy with reference to other major models in psychotherapy, as may be required for effective working with clients
4.4	Be able to identify and respond appropriately to areas of potential risk for the client, such as suicide, self-injury and other possible dangers to the client and to others
4.5	Be able to assess motivation and capacity for psychotherapeutic work, allowing the client to be aware of the options available, including identifying when psychological treatment may not be appropriate
4.6	Be able to use their theoretical training and clinical experience to reflect on and engage with complex, competing and contradictory information elicited from the client in order to develop an understanding of their problems and presentation and their origins
4.7	Be able autonomously to develop and describe an approach, framework or plan for the therapeutic work with a rationale that is clearly linked to and informed by theoretical knowledge and systematically accumulated clinical experience, skills and understanding associated with the theoretical model(s)
4.8	Be able to critically evaluate the approach, framework or plan in the light of client and other feedback as appropriate and, where there is a clear rationale for doing so, be able to identify, consider and apply variations to the approach as needed for effective working
4.9	Be able to use clinical judgement and personal initiative in order to balance adherence to a theoretical model against the need to flexibly and creatively respond to the specificity of the client's problems or any relational issues which present themselves
4.10	Be able to use research and other evidence to inform, critically reflect on and evaluate their own practice

Draft psychotherapy standards of proficiency version 14 January 2011

5	Be able to practise in a non-discriminatory manner
5.1	Be able to understand any limitations of their theoretical model or models in enabling the therapist to deal with clients from different socio-cultural contexts; be able to make adjustments to enable the client's full participation in the therapy and therapy relationship; be able to meet effectively the client's socio-cultural and contextual needs
5.2	Be able to work with clients in a manner that acknowledges the possible socio-cultural and contextual limitations of both the approach and the therapist in relation to specific clients or client groups
5.3	Be able to identify when the client may be best served by being referred on to a practitioner better able to work with their socio-cultural or contextual needs
6	Be aware of the impact of culture, equality and diversity on practice
6.1	Be able to understand the relevance and potential impact of a range of specific social and cultural factors on the client's problems and presentation and on the effectiveness and acceptability of the approach
6.2	Be able, where social and cultural differences and diversity actually or potentially impact on the effectiveness and acceptability of the approach, to make adjustments to the approach, with the aim of maximising its potential benefit to the client
7	Be able to maintain confidentiality
	Refer to 2.1
8	Be able to communicate effectively
8.1	Be able to demonstrate effective communication both verbally and in writing to a level commensurate with that required for the recognised standards for a masters' level or equivalent standard of practice.
8.2	Be able to select, move between, understand and use appropriate forms of verbal and non-verbal communication with clients
8.3	Be able to invite and work with multiple levels of communication that arise in and out of awareness for both client and therapist (such as verbal, non-verbal, somatic, and/ or expressive communications)
8.4	Be aware of the characteristics and consequences of non-verbal communication and how this can be affected by socio-cultural differences and be able to adapt communication style to meet these needs

Draft psychotherapy standards of proficiency version 14 January 2011

8.5	Be able to provide clients with the information necessary to enable them to give informed consent, wherever possible for the client to do so
8.6	Where the therapist does not share the same language as clients, be able to identify appropriate strategies to ensure and enable the client's full participation in the therapy
9	Be able to work appropriately with others
9.1	Be able to build and sustain professional relationships and be able to work collaboratively as appropriate to the work context
9.2	Be able to make referrals where appropriate
10	Be able to maintain records appropriately
	Refer to 2.1
11	Be able to reflect on and review practice
11.1	Be able to help clients reflect on their progress in therapy
11.2	Be able to assess and review the appropriateness and effectiveness of the therapeutic work in collaboration with the client, consistent with the therapists' theoretical approach, including awareness of formal measurements or other methods of review and assessment
11.3	Be able to adapt or revise their formulation of the client's problems and the approach they had taken to it in response to client feedback and/or the results of formal measurements or other methods of review and assessment
12	Be able to assure the quality of their practice
12.1	Be able to self-monitor, manage and maintain the quality of their practice
12.2	Be able to assess and review the appropriateness and effectiveness of clinical, other supervision and any other practice review arrangements needed to maintain and develop effective practice

Draft psychotherapy standards of proficiency version 14 January 2011

13	Be able to draw on appropriate knowledge and skills to inform practice
13.1	Be able to draw upon a body or bodies of psychological and psychosocial knowledge that provide a coherent and comprehensive framework for understanding their clients' presentations and for ways in which this understanding is communicated
13.2	Be able to draw on knowledge of theories and evidence concerning psychological development, psychological disorder and severe mental, emotional or psychosocial distress across the lifespan
13.3	Be able to draw on knowledge of factors common to all major psychotherapeutic and psychological approach
14	Understand the key concepts of the bodies of knowledge, which are relevant to their profession
14.1	Be able to draw on a coherent and systematic body or bodies of psychological and psychosocial theory that continues to be developed, codified and /or elaborated and that underpins their theoretical model
14.2	Be able to draw on and be able to evaluate theories and research around: <ul style="list-style-type: none"> • Lifespan development • Psychopathology • The therapeutic relationship and therapeutic change • Personality and individual differences • Diversity and socio-cultural concerns • Contemporary developments with specialist groups and/or areas of practice
14.3	Be able to understand the presentation, development and maintenance of the full range of mental and emotional health problems and their impact on social and individual functioning
15	Be able to establish and maintain a safe practice environment

Psychotherapists and Counsellors Professional Liaison Group

Minutes of the tenth meeting of the Psychotherapists and Counsellors Professional Liaison Group held as follows:-

Date: 2 February 2011

Time: 10:30 am

Venue: The Council Chamber, Health Professions Council, Park House,
184 Kennington Park Road, London SE11 4BU

Present: Carmen Joanne Ablack
Sally Aldridge
Malcolm Allen
Fiona Ballantine Dykes
Mary Clark-Glass
Jonathan Coe
Mick Cooper
Peter Fonagy
Jeff Lucas
Brian Magee
Shirley Reynolds
Eileen Thornton
Annie Turner
Nick Turner
Diane Waller (Chair)

In attendance:

Ebony Gayle, Media and PR manager
Michael Guthrie, Director of Policy and Standards
Louise Hart, Secretary to Council
Sarah Oliver, PA/Team Administrator
Marc Seale, Chief Executive (for item 11)
Charlotte Urwin, Policy Manager
Anna van der Gaag, Chair of Council

The Chair welcomed members of the PLG and those in the public gallery to the meeting. The Chair of HPC then updated the group on the implications of the Health and Social Care Bill on the HPC. The following key points were made:-

- the HPC would be renamed the Health and Care Professions Council;
- the statutory regulation of social workers would be transferred from the General Social Care Council to the HPC;
- HPC would be given powers to set up voluntary registers for unregulated professions or related professions;
- The CHRE would be renamed the Professional Standards Authority for Health and Social Care and they would be given powers to accredit voluntary registers.

Item 1.11/1 Apologies for absence

- 1.1 Apologies for absence were received from Julian Lousada (Malcolm Allen attending instead), Linda Matthews (Shirley Reynolds attending instead) and Jean McMinn.

Item 2.11/2 Approval of agenda

- 2.1 The Group approved the agenda.

Item 3.11/3 Minutes of the Professional Liaison Group meeting held on 15 December 2010 (report ref: PLG 1/11)

- 3.1 The Group considered the minutes of the ninth meeting of the Professional Liaison Group.
- 3.2 The group noted that Mary Clark-Glass and Eileen Thornton were present so the minutes needed to be amended accordingly.
- 3.3 A suggestion was made that paragraph 6.5 should be amended to read:-

6.5 The Group overall felt that the draft standards of proficiency for level 5 and level 7 counsellors demonstrated a clear difference and could be justified on the grounds of public protection. The Group noted that a 'level 5' counsellor would be expected to work with clients with mild to moderate mental health problems, psychological difficulties and obstacles to well-being while a 'level 7' counsellor would be expected to work with a full range of psychological

difficulties. The proposed model envisaged that 'level 5' counsellors would need to undertake conversion training in order to work as a 'level 7' counsellor. The Group noted that, if the proposed model was implemented, conversion training would need to be developed by training providers.

The Group concurred with the suggestion.

- 3.4 The Group agreed that the minutes of the ninth meeting of the Professional Liaison Group should be confirmed as a correct record and signed by the Chair, subject to the amendments detailed above.

Item 4.11/4 Matters arising

- 4.1 There were no matters arising.

Item 5.11/5 The structure of the Register: Children and young people (report ref: PLG 2/11)

- 5.1 The Group received a paper for discussion from the Executive.
- 5.2 The Group noted that a decision was required as to whether the Register should be structured to differentiate between those practitioners qualified to work with adults and those qualified to work with children.
- 5.3 During the course of discussion, wide ranging views were expressed as follows:-

- That the UKCP had drafted a set of standards specifically for those practitioners working with children and a set of standards for those holding the title of "Child Psychotherapist." The UKCP would also be annotating their Register to indicate those psychotherapists possessing the competencies required to work with children;
- The view was expressed that any Register needed to be simple and minimalist in order to serve public protection and a record of practitioners specialisms or additional competencies could be held by the professional bodies;
- There was a strong need to have a protected title of "child psychotherapist" since the training that leads to that

qualification is distinct from the outset to the adult psychotherapy training;

- That the competencies required for working with children did not constitute a specialism but were a result of an entirely different training pathway;
- Care needed to be taken to ensure that children and young people were not considered “mini adults” and those working with children required a specific understanding and ability;
- Some members of the group believed that the child psychotherapy training must build on the basic principles of psychotherapy training and therefore felt that differentiation in this regard was not required since one set of standards of proficiency could apply;
- The Group noted that child psychotherapists exist as a recognised title within the health service;
- The suggestion was made that the principles that apply to the radiographer part of the HPC register could apply to psychotherapists and counsellors whereby there would be a common set of standards with two protected titles with some further standards that are distinct between the two protected titles;
- That there were clearly standards that would apply to both psychotherapists and child psychotherapists. However, there were enough distinct standards to justify differentiation;
- That a child psychotherapist would be dealing with complex cases that would be beyond the capabilities of a psychotherapist who worked with children;
- That the commonality between those practitioners working with children and those practitioners working with adults was greater than the difference hence the reason why counsellors had not looked to differentiate;
- The view was expressed that if a member of the public was seeking therapy for their child, they would wish that practitioner to be qualified as a child psychotherapist. They therefore believed that differentiation was required. However, on the converse, the view was expressed that whilst an individual may

seek a practitioner that had trained as a child psychotherapist, this did not necessarily support the need for a separate protected title.

5.4 The Group noted that it was unlikely that agreement would be reached on the issue and it was therefore down to the Council to decide. Members of the group however felt that it would be useful to vote on the issue so that the figures could be presented to Council to assist in their determination of the issue. The members of the PLG who are also members of Council decided not to take part in the vote.

5.5 Members of the group, with the exception of HPC members, were then asked to vote on whether the title of child psychotherapist should be a separate, protected title:-

In favour	4
Against	3
Abstain	3

5.6 The Group agreed that the voting figures set out in 5.5 should be presented to Council in order that they could determine whether the title of 'child psychotherapist' should be a separate, protected title.

Item 6.11/6 Threshold level of qualification for entry to the Register (report ref: PLG 3/11)

6.1 The Group received a paper for discussion from the Executive.

6.2 The Group noted that a decision was required as to whether the first point of entry for a counsellor should be set at level four or five.

6.3 During the course of discussion, the following points were made:-

- One of the standards of proficiency for entry to the Register was to be an autonomous practitioner and so training should be delivered at level five to ensure this standard could be met;
- That BACP research had shown that the majority of training was now being delivered at level five;
- Concern was expressed that by setting a requirement of level five training for entry to the Register may increase the cost of training which could in turn have implications for those organisations delivering training and those attending training;

- The suggestion was made that training may be reconfigured to avoid lengthening of the training course to cover the level five curriculum;
- That education providers would have between four and five years notice before they would have to make changes to their programmes.

6.4 All members of the PLG were asked to vote on whether the first entry point for counsellors should be set at level 5:-

In favour	14
Against	0
Abstain	1

6.5 The Group agreed that the voting figures set out in 6.4 should be presented to Council in order that they could determine the first entry point to the Register for a counsellor.

Item 7.11/7 Differentiation and standards of proficiency (report ref: PLG 4/11)

- 7.1 The Group received a paper for discussion from the Executive.
- 7.2 The Group noted that a decision was required on the structure of the Register and an in principle decision on both the draft standards of proficiency and the threshold level of entry to the Register. The Group noted that bullet one under “to agree the structure of the Register including” on page one should read “to formally agree whether the Register for counsellors should be differentiated so that there are different entry points for ‘level five **counsellors**’ and ‘level seven counsellors.’
- 7.3 With the exception of one member of the group who abstained from the vote, the Group agreed that the Register for counsellors should be differentiated so that there are different entry points for ‘level five counsellors’ and ‘level seven counsellors.’
- 7.4 During the course of discussion on whether the Register should differentiate between psychotherapists and ‘level seven counsellors’, the following points of view were expressed:-

- When there was a joint meeting of both the psychotherapy and counselling professional bodies, there was no agreement on whether there should be differentiation between psychotherapists and counsellors. Whilst there were clear differences in terms of the language and philosophy of the professions, some felt that these differences were not the basis for differentiation within statutory regulation;
- On the contrary, a member noted that there was a broad consensus at the meeting referred to above that there should be differentiation. The justification was that there was a clear difference in terms of the language used by the professions;
- That no practitioner would “lose” by differentiating between the two professions;
- That it was important to consider whether differentiation would be meaningful for a service-user;
- The standards of proficiency for psychotherapists did not reflect the role of a counsellor and so differentiation was required;
- That whilst there was an overlap between the work of a ‘level seven counsellor’ and a psychotherapist, the language used within the professions was very different and this point about semantics was very important;
- A member of the Group drew on examples from other countries who made a clear distinction between psychotherapists and counsellors. In particular, the group noted the definition of a psychotherapist as set out by the European Association for Psychotherapy (EAP) and the definition of counselling as set out by the European Association for counselling (EAC);
- That the differences between the two professions needed to be clearly articulated in order to provide the justification for differentiation;
- That the definition of a psychotherapist set out by the European Association for psychotherapy had a clinical emphasis with use of words “treatment” and “disorder;”

- That a major difference between a level seven counsellor and a psychotherapist is the requirement for the level seven counsellor to undertake research;
- That in drawing up the standards of proficiency for counsellors, the group avoided use of terms such as “mental health problems” as psychological difficulties were not the same as mental health problems;

The Group broke for lunch at 13:05hrs and resumed at 13:45hrs.

- The Group noted that the BACP was not a member of EAC nor did it subscribe to its definition of counselling;
- The BACP had considered both sets of standards of proficiency and found it hard to differentiate between the two. In addition, differentiation would not add to public protection;
- That the different language used by the professions clearly supported the need for differentiation particularly since language was the therapeutic tool;
- That the definition of psychotherapy set out by the EAP was entirely congruent with the standards of proficiency for psychotherapists. Unless those standards of proficiency could be applied to counselling, there was clearly a need for differentiation;
- A view was expressed that a psychotherapist, in the course of their treatment, would be addressing the issues underlying the actual disorder or distress which a level seven counsellor would not. A member of the group felt that this was not an acceptable statement;
- A member of the group felt that the differences between the two professions was material enough to warrant differentiation on the Register;
- That further work on the standards of proficiency for the two groups was required to ensure that the differences between the two groups were captured;
- It was important to ensure the professions were onboard with the proposals and so it was important not to underestimate the

views of the BACP who represented some 36,000 professionals;

- There was an increasing number of joint psychotherapy and counselling courses thus illustrating the need to not differentiate between the two professions;
- That whilst some professionals may consider themselves to be both a counsellor and a psychotherapist, it was likely that they classified themselves to be one or the other on entry to the Register;
- There would be losers if the two professions were conflated but no losers if agreement was reached to differentiate.

7.5 The Group noted that it was unlikely that agreement would be reached on the issue and it was therefore down to the Council to decide. Members of the group however felt that it would be useful to vote on the issue so that the figures could be presented to Council to assist in their determination of the issue. The members of the PLG who are also members of Council again decided not to take part in the vote.

7.6 Members of the Group were asked to vote on whether the Register should differentiate between psychotherapists and level seven counsellors:-

For	6
Against	1
Abstain	3

7.7 The BACP wished to place on record their dissent.

7.8 The Group agreed:-

- (i) The Council be informed that the PLG were in agreement that the Register for counsellors should be differentiated so that there are different entry points for 'level five counsellors' and 'level seven counsellors.' with the exception of one member of the group who abstained from the vote;
- (ii) That the voting figures set out under 7.6 should be presented to Council in order that they could determine whether the

Register should differentiate between psychotherapists and level seven counsellors; and

(iii) that further work was required on the standards of proficiency.

The Group noted the following papers:

Item 8.11/8 Professional Liaison Group workplan (report ref: PLG 5/11)

Item 9.11/9 Responses to the draft standards of proficiency from the consultation on the proposed statutory regulation of psychotherapists and counsellors (report ref: PLG 6/11)

Item 10.11/10 Generic standards of proficiency (report ref: PLG 7/11)

Item 11.11/11 Any other business

Title of Level Seven Counsellor

- 11.1 The group noted that should a level seven counsellor and psychotherapist be differentiated on the Register, the protected title of the level seven counsellor needed to be determined.
- 11.2 The group noted several suggestions (practitioner counsellor, psychological counsellor) although it was agreed that further consideration needed to be given to this issue.
- 11.3 The group agreed to inform the HPC's Executive of any suggestions for the title of a level seven counsellor in advance of the Council's consideration of the findings of the PLG in May.

The Chair of the group wished to place on record her thanks to the members of the PLG for their commitment to the group. She also wished to thank the professional bodies for their contribution over the course of the PLG. Thanks were given to the Policy and Standards Department for their hard work over the last few years and the Secretariat department for their assistance.

The Chief Executive also wished to place on record his thanks to the group for their help in drafting the standards which were at the heart of regulation. In particular, he wished to thank Diane Waller for the personal investment she had made to the work of the group as Chair.

These thanks were echoed by the Chair of Council.

Confirmed

Chair

Date