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The Health Professions Council

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Minutes of the second meeting of the Psychotherapists and Counsellors
Professional Liaison Group held on **Wednesday 28 January 2009** and **Thursday
29 January 2009** at Park House, 184 Kennington Park Road, London, SE11 4BU.

Present: Professor D Waller (Chairman)
Ms C Joanne Ablack
Ms S Aldridge
Ms F Ballantine Dykes
Mrs M Clark-Glass
Mr J Coe (part of item 5 and items 6-8)
Professor M Cooper
Professor P Fonagy
Mr J Lousada (part of item 4, part of item 5 and items 6-8)
Professor J Lucas
Mr B Magee
Ms L Matthews
Ms J McMinn
Professor G Smith
Ms E Thornton (items 1-4 and part of item 5)
Professor A Turner
Mr N Turner

In attendance:

Mr C Bendall, Secretary to the Group
Ms A Creighton, Director of Education (items 1-4 and part of item 5)
Mr M Guthrie, Head of Policy and Standards
Mr S Rayner, Secretary to Committees (items 1-4 and part of item 5)
Ms C Urwin, Policy Officer
Dr A van der Gaag, President

Item 1.09/1 Apologies for absence

- 1.1 The Chairman welcomed members of the Group and people in the public gallery. Members of the Group introduced themselves.
- 1.2 Apologies for absence were received from Ms K Murphy (Ms C Joanne Ablack attending instead). The Group noted that Ms R Mary Owen was unable to take up her membership of the Group for personal reasons and Mr Turner had replaced her.
- 1.3 The Group noted that Mr J Coe was expected to arrive later during the meeting.

Item 2.09/2 Approval of agenda

- 2.1 The Group approved the agenda.

Item 3.09/3 Minutes of the Professional Liaison Group meeting held on 4 December 2008

- 3.1 The Group agreed that the minutes of the first meeting of the Professional Liaison Group should be confirmed as a true record and signed by the Chairman, subject to the following amendments:
 - paragraph 4.4 should state that the HPC would hold a three-month consultation on the recommendations from the Professional Liaison Group. The HPC would then consider the recommendations in the light of the consultation and make recommendations to the Department of Health;
 - at the end of paragraph 6.8, the last modality for which National Occupational Standards for psychological therapies were being developed should read 'Humanistic, Person-Centred, Process Experiential'.
 - the minutes should state that a question had been raised about how the counselling National Occupational Standards would be integrated, or not, into the National Occupational Standards being developed in four modalities for the psychological therapies by Skills for Health. The Group had noted that this issue had yet to be resolved.

Item 4.09/4 Matters arising

- 4.1 The Group received a paper to note from the Executive.
- 4.2 The Group noted the actions list as agreed at the last meeting. The Group noted that the reference group meeting due to be held in

Manchester at the end of March 2009 would include a presentation from a profession which had previously become subject to statutory regulation.

- 4.3 The Group noted that its work would address the areas which were also covered by the HPC's process for considering a profession's application for statutory regulation. The Group noted that the HPC had revised the process on 1 October 2008, to include a consultation on the draft standards of proficiency; the draft standards of education and training; proposed protected titles; the structure of the Register and grandparenting arrangements before a recommendation to the Secretary of State is made.

Item 5.09/5 Structure of the Register and protected titles

- 5.1 The Group received a paper for discussion from the Executive, which dealt with issues around the structure of the Register and protected titles for psychotherapists and counsellors. During the latter part of the discussion, the Group received examples of the HPC's standards of proficiency for three professions (arts therapists; clinical scientists; and radiographers) and the standards of education and training.
- 5.2 The Group agreed that any decisions reached should be a working position which would have to be tested at future meetings and, if necessary, revised in the light of subsequent debate. The Group noted that the work at each of its meetings would be inter-related.

Differentiation between psychotherapists and counsellors

- 5.3 The Group agreed that psychotherapists and counsellors carried out similar functions which required similar skills – i.e. psychotherapy and counselling were both talking therapies, which worked with people dealing with difficulties and distress. However, the Group felt that there were subtle and complex distinctions between the two professions and how they had developed, with each profession having its own characteristics and strengths. At the same time, there were also differences within each profession (for example, different approaches taken to practice). The Group noted that it was possible that some psychotherapists might currently practice under a job title involving the word 'counsellor' (and vice versa).
- 5.4 The Group received a tabled paper explaining the regulatory implications of differentiation or no differentiation between psychotherapists and counsellors. Differentiation would mean two sets of standards of proficiency; practitioners would either have

access to the protected titles for psychotherapists or the protected titles for counsellors (or both if they were dual registered); and there would be approved qualifications for each profession, potentially at different levels of education. The Group noted that no differentiation between psychotherapists and counsellors would mean one set of standards of proficiency; practitioners would have access to any protected titles for the part of the Register; there would be approved qualifications that lead to the eligibility to apply for registration and use any of the protected titles; and the threshold educational level would be set at the level necessary to achieve the standards of proficiency. As there would only be one set of standards of proficiency, this would mean that only one level could be set for entry to the part of the Register.

- 5.5 The Group agreed that, as a working position, it would be appropriate to have a part of the Register for psychotherapists and counsellors which differentiated between the two professions. In relation to the standards of proficiency, the Group felt that psychotherapists and counsellors would share generic standards with the other professions regulated by the HPC and also have standards of proficiency which were common to psychotherapists and counsellors. There would also be standards of proficiency which were specific to psychotherapists only and specific to counsellors only. (Please see the diagram in the appendix to these minutes).

Alternative structures for the Register

- 5.6 The Group discussed alternative structures for the Register which had been suggested in response to the HPC's call for ideas. One argument had been for the Register to be divided into three distinct parts – psychotherapists; psychotherapeutic counsellors; and counsellors. It had been argued that protection of the three differentiated titles would reflect the longstanding and current practice of differentiation based on standards across the profession.
- 5.7 The Group felt that the term 'psychotherapeutic counsellor' would not be readily understood by the public and its inclusion would make the structure of the Register more complex. The Group noted that the titles 'psychotherapist' and 'counsellor' were already widely used and understood, whilst the title 'psychotherapeutic counsellor' was not commonly used in the UK. The Group felt that, if the differences between psychotherapists and counsellors were already subtle and complex, it would be extremely challenging to further differentiate psychotherapeutic counsellors. The Group therefore agreed not to include 'psychotherapeutic counsellor' in the Register.

- 5.8 The Group discussed responses to the call for ideas which had suggested that those who opposed regulation should be recognised on the HPC's Register as a list of 'conscientious objectors'.
- 5.9 The Group noted that, over time, a wide range of professionals had become subject to statutory regulation, in order to protect the public by giving assurance about professional standards and enabling the public to have a remedy in the event of misconduct. There had been a move over time away from professionally led self-regulation to a situation where healthcare regulators now had equal numbers of professional and lay members on their Councils. Members of the Group questioned why 'conscientious objectors' to statutory regulation would wish to be included on a list maintained by a statutory regulator and if the individuals concerned would be prepared to be subject to the HPC's processes and procedures. The Group agreed that it would not be appropriate for the HPC Register to include a list of 'conscientious objectors'.
- 5.10 Members of the Group felt that there was a need for the HPC to continue to engage with opponents of statutory regulation, who were sincere in their philosophical opposition to statutory regulation and had written to members of the Group to make their views known. Some members felt that it was possible that some opponents did not understand the difference between 'state regulation' and 'statutory regulation' and did not understand that the HPC regulated a wide range of professions, not only those which followed the medical model.

Modality specific titles

- 5.11 The Group noted that respondents to the call for ideas had suggested numerous modality specific titles that they believed should be protected. The Group noted that it was likely that there were hundreds of modalities and, if modality specific titles were protected, these would need to be available to both counsellors and psychotherapists. The Group felt that it would be more straightforward and understandable for the public if the number of protected titles was minimised. In discussion, the following points were made:
- adding numerous protected titles to the Register would not strengthen public protection;
 - it was not necessary to include modalities in protected titles, because practitioners could advertise and promote their modalities through other means;

- clients who were interested in the modalities used by a practitioner were likely to make their own enquiries with the practitioner or the practitioner's professional body; and
 - arts therapists practised in different modalities but these were not recorded on the HPC register.
- 5.12 A member expressed a view that the HPC Register should identify those modalities that were coherent and evidence based. Other members felt that it would be highly inappropriate for a regulator to decide whether a modality was effective. It was pointed out that evidence of effectiveness would develop over time. The Group noted that a Department of Health steering group had recommended that the HPC should regulate acupuncture, herbal medicine and traditional Chinese medicine, although there was currently a lack of evidence of efficacy.
- 5.13 The Group noted that the HPC's standards of education and training (SET) included a requirement that the delivery of a programme of training should assist '...autonomous and reflective thinking and evidence based practice.' (SET 4.5). The Group noted that, if the HPC visited a programme of education or training, the HPC's Visitors would include registrants in the relevant modality.
- 5.14 The Group agreed that its working approach would be that the Register should not differentiate by modality. The Group agreed that the issue of modality-specific titles should be explored further when the Group discussed the standards of education and training.

Psychological therapists

- 5.15 The Group noted that a number of respondents to the call for ideas had suggested that the Register might be structured similarly to the existing register for arts therapists, with a non-protected umbrella term used as the title. The most common suggestion for this was 'psychological therapists'. Some respondents had suggested that this title should be protected. There had been some suggestions that this model might allow for the eventual registration of practitioners who delivered psychological therapies, but 'below the level' of psychotherapists and counsellors and other statutorily regulated professionals who deliver therapy.
- 5.16 The 2007 White Paper 'Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century' said that 'other psychological therapists' such as the psychological therapists referred to might become regulated in the future. The Group noted that it was

outside its remit to consider whether 'psychological therapists' should be regulated by the HPC, although the title was increasingly used in NHS trusts. It was noted that the standards and training for psychological therapists varied significantly between NHS trusts. The Group felt that the public might not understand the differences between psychological therapists; psychologists; psychotherapists; and counsellors.

- 5.17 The Group agreed that, while it should be aware of the developments and complexity in this area, it would not be appropriate at this stage to use the term 'psychological therapists' in the HPC Register.

Use of 'psychotherapist' by other regulated professionals

- 5.18 The Group noted that the title 'psychotherapist' was in use by other regulated professionals, particularly psychologists. The British Psychological Society held a Register of psychologists who were qualified in delivering psychotherapy. It appeared that a number of these practitioners also held membership of psychotherapy and counselling registers. Some practitioners might therefore be eligible for separate registration as a psychotherapist.
- 5.19 The Group noted that a recent report by a Department of Health working group had discussed use of protected titles by other, already regulated health professionals (in the context of regulation of acupuncturists, medical herbalists and traditional Chinese medicine). The working group had proposed that an agreement might be reached on which regulated professions might be able to continue to use protected titles, provided that they were clear about the professional background. The Group noted that no final decision had yet been reached.
- 5.20 The Group noted that other professions might use the titles 'counsellor' and 'therapist' – for example, nurse counsellor and nurse therapist. The Group felt that individual professionals would choose how to develop their practice and would decide which protected title or titles to use. The Group noted that some practitioners might choose to be on several registers, depending on the scope of their practice.
- 5.21 The Group noted that, if an individual chose to be registered in two parts of the HPC's Register, they would be expected to meet the standards of education and training and the standards of proficiency for both relevant parts of the Register. The Group noted that the HPC believed that individual registrants should exercise their professional

judgement, in order to work safely and effectively within their scope of practise.

Client groups

- 5.22 The Group noted that a small number of respondents to the call for ideas had said that the Register should be structured to differentiate between practitioners who were qualified to work with different client groups, in particular those who were qualified to work with children and young people. The Group noted that a number of professional bodies had submitted responses which argued that the Register should enable members of the public to distinguish the different levels of specialism and the nature of training and that separate standards should be produced for practitioners working with adults and those working with children and young people.
- 5.23 The Group felt that, in principle, it would not be helpful for the public to structure the information in the way suggested, as this would make the Register overly complex. In discussion, the following points were made:
- the HPC's register did not currently indicate if a professional was qualified to work with vulnerable people, children or young people. Employers were likely to be best placed to decide if a practitioner was able to work with a particular client group;
 - training to work with client groups could either be pre-registration or post-registration. It was suggested that specialisation in a particular client group might be recognised by an annotation to the Register;
 - there were a range of client groups (such as people with learning disabilities and people with eating disorders) which could also be recognised as protected titles;
 - a member expressed a view that, historically, child psychotherapy had been recognised as a profession under the Whitley Council. Other members of the Group pointed out this had applied solely within the NHS and had not been for the purposes of statutory regulation or public protection;
 - individuals regulated by the HPC were expected to use their own professional judgement about their scope of practice and whether they were practising safely and effectively;
 - there was a trend away from delineation by client group and for professionals to work in a multi-professional environment;
 - it was possible that the standards of proficiency might include requirements for understanding and knowledge of working with client groups;

- professionals should be able to deal with a range of equality and diversity issues and comply with legislative requirements relating to vulnerable groups; and
- notwithstanding the HPC's decision on whether to protect the title, it was likely that the title of child psychotherapist would continue to be widely used.

The Group agreed that its working approach would be that the Register should not differentiate to specifically identify practitioners qualified to work with children and young people. The Group agreed that this subject might be re-visited in light of subsequent discussion on education and training.

Protection of title

- 5.24 The Group discussed the HPC's proposed approach to protection of title for psychotherapists and counsellors. The Group noted that regulation by protection of title was common across the UK health regulators, although there were some examples of protection of function. The Group noted that the paper outlined existing titles protected by the HPC and the HPC's legal powers in cases where a protected title was being misused. The Group noted that, in any proceedings brought by the HPC, the HPC had to prove that the title was used with the intention of misleading members of the public. Intention to deceive could be both express (e.g. an individual advertised that they were a physiotherapist but they were not registered with the HPC) and implied (e.g. an individual did not use a protected title but advertised that one of the services they offered was 'physiotherapy' and they were not registered with the HPC).
- 5.25 The Group discussed whether the HPC should only protect the 'stem' of a title (i.e. 'counsellor' or 'psychotherapist') or also protect titles which used an adjective before the 'stem' title. The Group noted that seven protected titles were proposed for the regulation of practitioner psychologists, but these reflected seven well-defined domains which were widely recognised by that profession.
- 5.26 The Group agreed that the title 'counsellor' should be protected if possible, as it was widely used by practitioners and widely understood by the public. The Group felt that, if it was not possible to protect the title 'counsellor', 'registered counsellor' might be protected instead, but this should be the subject of further discussion. The Group agreed that the title 'psychotherapist' should also be protected. The Group agreed that the Executive should investigate whether it would be legally possible to protect those titles and report back to a future meeting.

Action: MG (April)

Education and training

- 5.27 Members felt that provision of training and education in both counselling and psychotherapy was highly diversified. Some individuals might not have obtained a formal academic qualification but they were often highly experienced, whilst others had obtained undergraduate or postgraduate qualifications. Provision of training had also been influenced by allocation of funding. The Group noted that training tended to overlap the two professions and there was sometimes no clear division in training for the two professions. The Group noted that accreditation by professional bodies might involve completion of training, followed by obtaining three to five years' experience.
- 5.28 The Group noted that the HPC was currently reviewing its standards of education and training (SETs). It was possible that the SETs would be revised to remove specified threshold levels of qualification, as currently defined in SET 1, but this would be subject to consideration by the HPC's Education and Training Committee and the Health Professions Council.
- 5.29 The Group noted that there was uncertainty about the exact numbers of psychotherapists and counsellors who were currently practising. In discussion, a minimum estimate of 55,000 was mentioned, with at least three-quarters of these being counsellors, although it was possible that were up to 100,000 psychotherapists and counsellors.
- 5.30 The Group noted that the HPC had an established procedure for considering applications for registration from practitioners who had qualified outside the European Economic Area (EEA). The procedure involved applications being assessed by two registration assessors from the relevant profession or modality. The assessors would decide whether a practitioner's training and experience would enable them to meet the standards of proficiency and might decide that applicants should undertake further verification or invitation to attend a Test of Competence based on the profession's standards of proficiency. Applicants had a right of appeal if their application was rejected.
- 5.31 The Group noted that applicants from the EEA or Switzerland who were already established in their profession could apply to provide professional services in the UK on a temporary and occasional basis. A European directive provided for mutual recognition of professional qualifications for members of the EEA or Switzerland.

Item 6.09/6 Professional Liaison Group workplan

- 6.1 The Group received a paper for discussion from the Executive.
- 6.2 The Group was invited to discuss the indicative plan of activities for future meetings. The Group felt that it would be useful to discuss the standards of education and training at its next meeting, drawing on the points made in discussion above. The Group noted, in the process of drafting the standards of proficiency and the standards of education and training, it could have regard to standards prepared by a number of organisations (such as the British Association of Counselling and Psychotherapy, the United Kingdom Council for Psychotherapy and Skills for Health). The Group noted that these standards could have a number of shortcomings (for example, not differentiating between psychotherapists and counsellors) but could be used as a starting point.
- 6.3 The Group noted that the Executive was considering how to gain wider views from service users, which could then be fed into the consultation process.

Item 7.09/7 Any other business

- 7.1 There was no other business.

Item 8.09/8 Date and time of next meeting

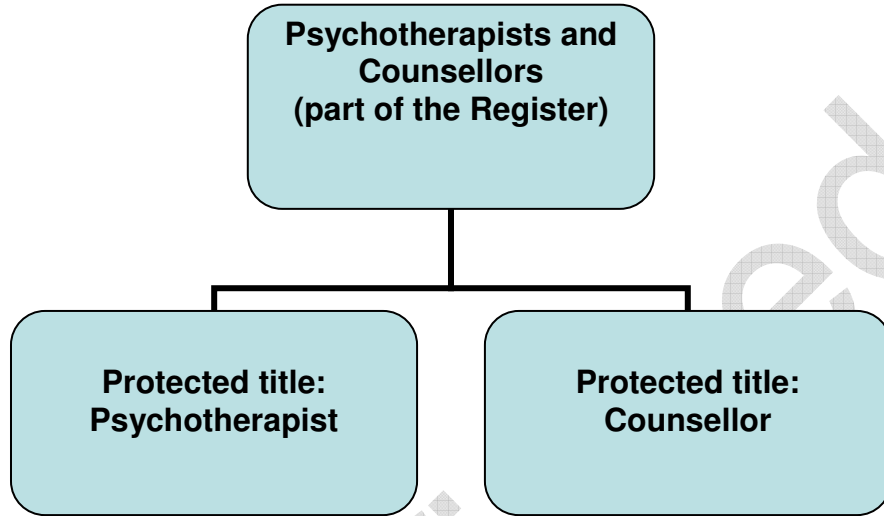
- 8.1 The next meeting of the Group would be held at 10.30 am on Tuesday 3 March 2009 and Wednesday 4 March 2009 (at Avonmouth House, 6 Avonmouth Street, London, SE1 6NX).
- 8.2 Subsequent meetings would be held at 10.30 am (at the HPC's office) on:
Wednesday 29 April 2009
Tuesday 26 May 2009 and Wednesday 27 May 2009

Chairman

Date

**Working outline of the structure of the register of
psychotherapists and counsellors**

(subject to amendment)



**Working outline of the structure of the standards of proficiency
for psychotherapists and counsellors**

(subject to amendment)

