

Psychotherapists and Counsellors Professional Liaison Group (PLG)
2 February 2011

The structure of the Register: Children and young people

Executive summary and recommendations

Introduction

The attached paper looks at the issues salient to the broad question of whether the Register should be structured, in some way, to differentiate between those qualified to work with adults and those qualified to work with children.

This paper is based on a previous paper on this topic considered by the PLG at its September 2010 meeting. The paper has been revised in light of the three presentations considered by the PLG which have addressed this topic, and given the group's ongoing debate in this area. The paper has also been abridged in places.

Decision

The PLG is invited to:

- discuss the attached paper;
- finalise its conclusions / recommendations to the HPC Council; and
- give clear reasons for the conclusions / recommendations reached.

Background information

This paper relates to the following in the PLG's terms of reference:

- 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.

Resource implications

None at this time

Financial implications

None at this time

Appendices

- Youth Access supplementary information
- 3 x anonymised job descriptions
- UKCP / ACP standards of proficiency

Date of paper

24 January 2011

The structure of the Register: Children and young people

1. Introduction

- 1.1 At its January and May 2009 meetings, the PLG discussed the question of whether the Register should be structured to differentiate between those practitioners qualified to work with adults and those qualified to work with children and young people. Some of this discussion focused on child and adolescent psychotherapists.
- 1.2 The PLG did not reach a clear decision on this topic at that time. In the consultation a broad question was asked on the issue. However, there was no clear consensus in responses about the approach that should be adopted. The HPC Council considered that this was one of those areas where it was not appropriate to make a firm conclusion until the opportunity had been taken to further explore the issues.
- 1.3 This topic has subsequently been considered by the PLG in its next round of meetings and the PLG has received three presentations on this topic. This paper has been written to assist the PLG in its consideration, thinking and discussion of this topic. In particular, the paper focuses the PLG's attention on the issues in this area as they pertain to regulation. It is acknowledged that the debate around the needs of children and young people (and other client groups) and how this should influence professional practice is a broader one than that which relates to regulation.
- 1.4 This paper is divided into seven sections:
 - Section two outlines the previous discussion on this topic.
 - Section three looks at two specific groups of practitioners.
 - Section four provides some background information about the existing HPC Register.
 - Section five provides some background information about some of the existing registers and special interest groups in the field.
 - Sections six and seven provide a summary and discussion of the issues as they pertain to regulation, inviting the PLG to reach its final conclusions.

2. Previous discussion

- 2.1 This area has been discussed on previous occasions by the PLG and we received some comments in the Call for Ideas and in the formal consultation. A summary and overview is provided below.¹

PLG

- 2.4 In its first round of meetings, the PLG has discussed this topic on two occasions. That discussion is summarised below:
- 2.5 The minutes of the Group's meeting on 28 and 29 January 2009 record the following discussion on this topic.

'The Group noted that a number of professional bodies had submitted responses [to the call for ideas] 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.

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

¹ For information about responses received to the Call for Ideas which informed the PLG's discussion, please see here:

<http://www.hpc-uk.org/aboutus/consultations/closed/index.asp?id=72>

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 [different] 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.²

2.6 This topic was revisited at the group's meeting in May 2009 and the minutes record the following:

'Some members of the Group felt that there was no additional evidence in the paper to justify differentiation on the basis of client groups. These members noted that the standards of proficiency would require registrants to practise within the legal and ethical boundaries of their profession. However, other members of the Group felt that practitioners required specialist training and skills to work with children and therefore the Register should differentiate.'³

Consultation

2.7 The consultation question read: 'Do you think that the Register should differentiate between practitioners qualified to work with children and young people and those qualified to work with adults? If yes, why? If not, why not?'

2.8 The broad terms of the question meant that responses to his question were often discursive in nature. In summary the following arguments were made in responses:

² Psychotherapists and Counsellors PLG, 28 and 29 January 2009, 5.22 and 5.23.

http://www.hpc-uk.org/aboutus/professionalliaisongroups/psychotherapistscounsellors_archive/index.asp?id=442

³ Psychotherapists and Counsellors PLG, 26 and 27 May 2010, 9.3

http://www.hpc-uk.org/aboutus/professionalliaisongroups/psychotherapistscounsellors_archive/index.asp?id=447

2.9 For:

- There is serious risk of harm to a vulnerable group if therapy is performed badly or by untrained practitioners.
- Children and young people have specific needs which need to be met by appropriately qualified practitioners.
- There are specific competencies that are necessary for working with children and young people.
- A failure to differentiate would mean that the HPC would not be well equipped to make decisions about complaints concerning work with children and young people.
- Child and adolescent psychotherapists are a specific group with distinct entry-level training.

2.10 Against:

- There are different 'entry routes' into work with children and young people including specialist training at entry to the profession; post-qualifying specialist training; and those who work with children and young people having undertaken CPD and gained additional experience.
- Many services do not see clients on this basis so differentiation would reduce the available workforce who could work with children and young people, reducing choice for clients.
- There is no greater justification to recognise this group in the structure of the Register than other practitioners working with other client groups.
- The responsibility of ensuring competence to work with any client group rests with the individual and with employers.

Subsequent discussion

2.11 This topic was considered at the PLG meeting on 30 September 2010, alongside two presentations: from the Place2Be and the Association of Child Psychotherapists (ACP). Youth Access presented to the group on this topic at its meeting on 15 December 2010.

2.12 A short summary of the key points raised / discussed at each meeting is provided below. Section three provides more information in relation to child and adolescent psychotherapists and youth counselling.

2.13 At the meeting on 30 September 2010 the following key points / arguments were made:⁴

⁴ Psychotherapists and Counsellors PLG, 30 September 2010
http://www.hpc-uk.org/assets/documents/10003171psychotherapists_and_counsellors_plg_20100930_minutes.pdf

- There was broad consensus that specific skills were required in order to work safely and effectively with children.
- Any actions taken in this area, including protection of specific title(s), should not adversely affect service delivery – including service providers' ability to recruit psychotherapists and counsellors to deliver services for children and young people.
- 'Child and adolescent psychotherapist' is a specific recognised title with a distinctive qualification at entry to the profession. This is distinct from others who deliver therapy to children. The argument for recognising child and adolescent psychotherapists in the structure of the Register is not the same as saying that only child and adolescent psychotherapists can work with children. There was some discussion about whether this could be said to be 'distinct profession' and about the currency of the title amongst others providing services to children in the field.
- Across the field as whole, there are variety of different training routes – including direct-entry qualifications for working with children, post-registration programmes, CPD, mentoring and supervision.
- Differentiation in the Register would mean protecting a title. It would not prevent other therapists from working with children and young people (i.e. it would not protect functions or activities).
- There was debate about differentiation in the Register as opposed to annotation of the Register and discussion about the HPC's current consultation on the topic of annotation.
- There was discussion about the importance that the standards of proficiency for all psychotherapists and counsellors ensured awareness of the skills required to work with children. If the Register was differentiated, specific standards of proficiency related to that group would be required. Some discussion about the HPC's ability to consider complaints in the absence of specific standards.

2.14 At the meeting on 15 December 2010 the following key points / arguments were made:

- The argument was made by the presenters that youth counsellors needed a separate protected title to ensure equal treatment; to recognise risk; and to give the regulator an opportunity to correct deficits in this area of provision.
- The group discussed the implications of this suggestion, discussing, amongst other things, the age group involved and the requirement for all practitioners to work within their scope of practice.

3. Specific groups

- 3.1 There are two specific groups where comments were made in the consultation and where representations have particularly been made to the HPC Executive regarding differentiation.

Child and adolescent psychotherapists

- 3.2 The Association of Child Psychotherapists (ACP) accredits trainings in child and adolescent psychotherapy and is the designated authority for the recognition of the qualifications of child and adolescent psychotherapists from European Union countries who wish to work in the United Kingdom.

- 3.3 The following definition of child and adolescent psychotherapy is given on the ACP website:

‘...child and adolescent psychotherapy is a psychoanalytic treatment for children, young people, parents and families. Child and adolescent psychotherapists treat a range of behavioural and emotional problems not easily addressed by other modes of treatment.

Therapists are trained to carefully observe a child or young person and respond to what they might be communicating through their behaviour and play. They also apply their framework of thinking to work with parents, families and carers and to training and supporting other professionals who work with children, young people, parents and families to ensure a deeper understanding of the child's perspective.’⁵

- 3.4 Child and adolescent psychotherapists work in a variety of settings including Child and Adolescent Mental Health Services (CAMHS), hospitals, schools, social services, the voluntary sector and in private practice.
- 3.5 In their response to the Call for Ideas, the ACP asked that there should be two distinct sections in the Register to denote those qualified to work with adults and those qualified to work with children, young people and their parents and carers. They asked that the title ‘child and adolescent psychotherapist’ be protected alongside other titles specifically for work with children, for example, ‘psychoanalytic child psychotherapist’.
- 3.6 In the consultation, the most frequently cited specific group was child and adolescent psychotherapists. Some respondents said that recognising this ‘distinct’ group, with its distinct title, was very different from arguing that practitioners could not work with children unless they had a specific specialist training.

⁵ ACP website, accessed 2 July 2010
<http://www.childpsychotherapy.org.uk/>

- 3.7 The ACP presented to the group at its meeting on 30 September 2010. The ACP argued that child and adolescent psychotherapists should be specifically identified in the structure with a specific protected title: 'child and adolescent psychotherapist'. It was argued that this was necessary to enhance public safety, given the specialist nature of the role of child and adolescent psychotherapists and specific doctoral level education and training at entry. In discussion, it was confirmed that as of the date of the meeting there were approximately 841 child and adolescent psychotherapists registered with the ACP.
- 3.8 In addition, in discussion the ACP and UKCP confirmed that their respective organisations have met to discuss the standards required for their registrants to work with children and young people.

Youth counselling

- 3.9 Youth Access, a national membership organisation for young peoples' information, advice, counselling and support services have made representations to the HPC Executive and in the consultation that consideration should also be given to separate recognition of the role and title of 'youth counsellor' (or similar).⁶
- 3.10 Youth Access argues that consideration should be given to protecting this title or similar because there are a distinctive set of skills and knowledge required to work with young people. They also argue that it is consistent with wider Government policy around the reform of the workforce delivering services for children and young people, as demonstrated by the 'Every Child Matters' programme and the work of the Children's Workforce Development Council (CWDC).⁷
- 3.11 In their consultation response, Youth Access argued that there was insufficient entry-level or post-qualification education and training opportunities available to equip practitioners with the skills required to work with children and young people. They outlined initiatives designed to improve this position including induction programmes, post-qualifying CPD and efforts to produce more formal qualifications to train counsellors to work with children and young people.
- 3.12 Youth Access have sent in job descriptions for psychotherapists and counsellors working in this field and three examples are appended to this paper. (See appendix 2 to this paper.)
- 3.13 At its meeting on 15 December 2010, Youth Access presented to the PLG, arguing that the title 'Youth counsellor' (or similar) should be protected and 'youth counsellors' specifically recognised in the structure of the Register.

⁶ Youth Access Website:
<http://www.youthaccess.org.uk/>

⁷ Every Child Matters Website:
<http://www.dcsf.gov.uk/everychildmatters/>

3.14 The following points were also made in the presentation:

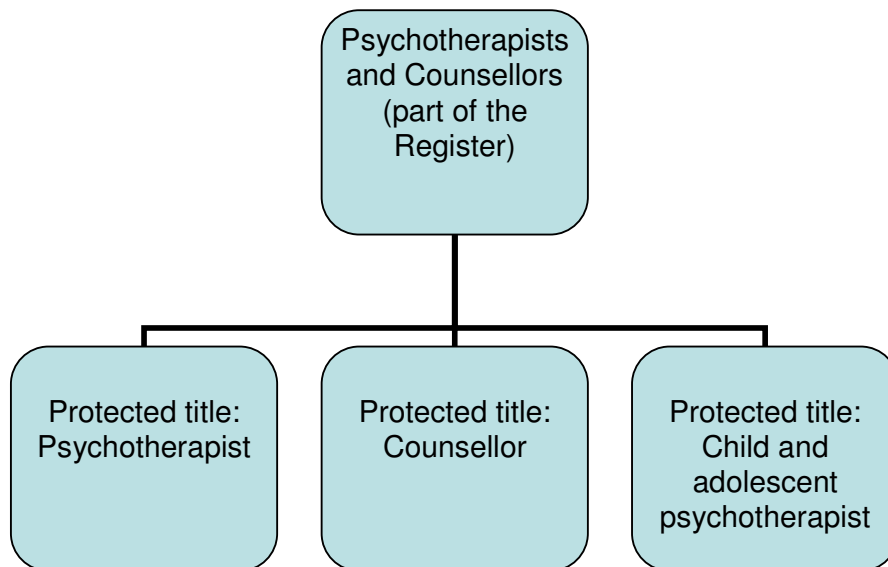
- The field of youth counselling is 'not neat and tidy' with service provision configured according to local needs and local values.
- The question of whether 'generic' standards of proficiency are sufficient given skills required to work with young people; including developmental differences compared to adults, confidentiality issues, safeguarding and risk.
- There is a training gap – contention that much current training does not equip practitioners to work with children and young people.
- The HPC needed to consider whether the regulatory approach would be supportive of equal treatment and recognise risks to health and wellbeing. It was asked whether this was: 'An opportunity to correct the deficits or regulate the faults?'

3.15 Youth Access have supplied the further information referred to at the meeting and this is appended to this paper. (See appendix 1.) At the meeting dual registration was mentioned and Youth Access have clarified their view that dual registration (i.e. registered as a counsellor and as a 'youth counsellor) would be an option for the majority of the existing workforce should there be differentiation. Future practitioners could train to work with both adults and young people as some already do now - or specialise in just working with young people.

4. The HPC Register

Differentiation

- 4.1 The PLG has previously discussed the issues around differentiating in the structure of the Register between psychotherapists and counsellors. For the Register to differentiate between those qualified to work with children and young people and those qualified to work with adults, the same 'conditions' would need to be met.
- 4.2 There would need to be specific education and training programmes (at first entry to the Register and, potentially, post-qualification) which deliver specific standards of proficiency and which lead to the use of a specific professional title or titles which it is possible to protect. The standards of proficiency would need to be capable of providing an objective basis on which to differentiate (or not) between the knowledge, understanding and abilities required for safe and effective practise and for access to different protected titles.
- 4.3 For example, the diagram below illustrates how the structure of the Register might look if child and adolescent psychotherapists were specifically recognised in the structure of the Register:



- 4.4 This would mean:
- In addition to the profession-specific standards of proficiency for psychotherapists and for counsellors, there would need to be profession-specific standards for child and adolescent psychotherapists.
 - Only someone who successfully completed a programme which met the standards for child and adolescent psychotherapists could use that title. (Although grandparent arrangements would need to exist in the transitional period following registration.)

- There would be specific approved qualifications leading to registration as a child and adolescent psychotherapist.
- 4.5 To illustrate, differentiation would not be possible where these ‘conditions’ could not be met:
- If there are no specific education and training programmes relating to the title and delivering specific standards of proficiency; or if there are a variety of different routes to ‘qualification’. For example, if practitioners are appointed to posts on the basis of CPD or experience with no consistent, specific qualification requirements relating to the role and title.
 - If there is no specific title, in common usage and commonly recognised, that it is possible to protect in law and which relates to the group which it is intended to regulate. For example, if employers simply use the title ‘counsellor’ but look for specific experience, training, skills and competence to work with children and young people as part of the appointment process.
 - If it is not possible to produce differentiated standards of proficiency which describe the standards required for safe and effective practice.

Existing HPC Register

- 4.6 The existing HPC Register does not differentiate between registrants on the basis of client group. For example, the Register of speech and language therapists does not differentiate between those who work with children and young people, and those who work with adults.
- 4.7 This is because for most of the professions currently regulated by the HPC there is not an explicit link between pre-registration education and training that delivers specialist competencies, conferring a specific title, to equip registrants for work with specific clients groups.
- 4.8 For example, undergraduate physiotherapy programmes will enable students to gain experience of a wide range of settings including physiotherapy for children and for disabled people. Once qualified and registered, a physiotherapist might specialise in a particular area or with a particular client group, gaining additional experience, CPD and education and training to do so (e.g. paediatric physiotherapists).

Information available on the Register

- 4.9 One argument put forward about differentiation relates to the Register providing information to enable informed choices to be made. It is important to note that the HPC Register provides a means by which someone can check if the practitioner they propose to see or employee is registered and has therefore met the regulator’s standards. It does not provide a means by which members of the public can find further

information about an individual's background, area of practice or (normally) any additional qualifications or experience.

- 4.10 In some of the existing professions regulated by the HPC, professional bodies and associations often provide a service by which members of the public can find information about registrants who specialise in work with a particular client group or condition in their area. For example, the Association of Speech and Language Therapists in Private Practice (ASLTIP) provides a facility by which members of the public can find practitioners in their area who have a specific interest or specialism in certain areas or with certain client groups.
- 4.11 These facilities therefore also act as a marketing tool, with practitioners often 'self-selecting' their area of specialism / special interest for work with clients. This is one role that professional bodies sometimes perform, in helping to promote the services of their members to members of the public.

Fitness to practise and fitness for purpose

- 4.12 The Register is about fitness to practise, showing that someone has met threshold standards for safe and effective practice and met the regulators requirements relating to their conduct and health. Fitness for purpose is a rather different concept – about whether someone has the specific skills, training and experience for a specific role or to meet specific needs.
- 4.13 In the event that the Register was not structured to specifically identify those qualified to work with children and/or young people, employers (and others), as they do now, could still make their own requirements as to the experience and qualifications of a registrant before being satisfied that they were suitable for a particular role.
- 4.14 For example, an employer might explicitly require accreditation with a particular organisation or look for specific experience for a particular role which could include previous experience of working with a particular client group, experience of particular therapeutic interventions or experience of leading or managing a team.
- 4.15 A frequent question in this area is how the HPC would deal with complaints about the practice of someone who was working with children and young people. This paper does not describe the HPC's fitness to practise process in detail but the following points may be helpful:
- A panel considering a case would take into account the HPC's standards of conduct, performance and ethics which include requirements around acting in the best interest of service users; and a practitioner staying within the area or areas of practice for which they have the requisite knowledge and skills (their scope of practice). They would also take into account the standards of proficiency in lack of competence cases.

- Panels would consider whether the facts of an allegation are proven and then whether it amounts to the ground of allegation (i.e. whether it amounts to misconduct). In doing this, panels will normally be considering, having regard to relevant standards, and taking into account the circumstances involved, whether what occurred was within the boundary of what might be reasonably expected by another reasonably competent practitioner.
- In considering whether the HPC's standards (standards of conduct, performance and ethics and standards of proficiency) are met the panel can take into account other relevant standards frameworks as appropriate. This might include the policies in place in the workplace, professional body guidance or national guidance produced by Government. The panel can consider such documents in deciding how far the HPC's standards have been met and whether the registrant's fitness to practise is impaired.
- Panels have representation from at least one person from the same profession as the registrant concerned and, in the case of psychotherapists and counsellors, the HPC would need to recruit panellists that reflect the breadth and diversity of modalities and approaches to practice.
- In complex cases, panels can also consider expert evidence to help them reach their decision.

Protected titles and scope of practice

- 4.15 The HPC, in keeping with most of the other professional regulators, normally regulates by protection of title. Each of the parts of the Register has at least one protected title which can only be used by someone who is registered with the HPC.
- 4.16 It is important to note that even if a title relating to a discrete group working with children and young people was protected, this would not legally prevent someone from working with children, young people, their parents and carers, as long as they did not use a protected title to which they were not entitled. Some of the example job descriptions seen by the Executive use the generic titles 'psychotherapist' and 'counsellor' and are open to both applicants with specific training and voluntary registration relating to children and young people, and to those who cannot satisfy these requirements but have prior experience of working with these client groups.
- 4.17 Regardless of whether any additional differentiation is introduced, all registrants, including any who held any 'specialist title' would be bound by the requirement to only practise in those areas in which they have appropriate education and training, experience and supervision and to

ensure that they represent their qualifications, experience and the services they offer in a fair and accurate way.⁸

⁸ HPC Standards of conduct, performance and ethics, paragraphs 6 and 14

5. Voluntary registers

- 5.1 Professional organisations in the field who hold registers / membership lists adopt a variety of different approaches to reflecting whether practitioners work or are qualified to work with children and young people. Not all Registers have specific sections denoting those qualified to work with children and young people and others allow practitioners to indicate where they have a particular interest or specialism in a specific area, in order to provide information to the public and to market their members' work. Some bodies also have special interest groups and the like for members with an interest in this area to develop standards and best practice guidance and to share experience.
- 5.2 It is important to draw a distinction between the statutory register as a register of fitness to practise and other types of register which might also exist to market the skills and experience of practitioners. Special interest groups exist to provide a forum for discussion amongst practitioners.
- 5.3 A short summary of some of the Registers and search tools available is given below:
- Youth access provides a portal for members of the public to find services providing information, advice and therapy for children and young people, their parents and carers.
 - The ACP provides an online portal which allows members of the public to find child and adolescent psychotherapists in their area. These are practitioners who have successfully completed ACP approved training. However, this only includes members who work privately / independently.
 - The BPC Register includes those who have undertaken specific ACP recognised training in child and adolescent psychotherapy. Their Register identifies where someone is qualified as a child and adolescent psychotherapist.⁹
 - The UKCP Register is not sub-divided to show those specifically qualified to work with children and young people, but does allow practitioners to indicate their experience / interests to the public including children and young people, disability, coaching and family for example. A member of the public can search against these headings to find a therapist. The UKCP also has a faculty – 'the Faculty for the Psychological Health of Children' which is open to members and whose goals include to act as voice for practitioners working with children and young people and to uphold good standards in the field.¹⁰

⁹ BPC Register:

<http://www.psychanalytic-council.org/main/index.php?page=10097>

¹⁰ UKCP Find a Therapist

<http://members.psychotherapy.org.uk/find-a-therapist/>

- The BACP Register allows members of the public to find practitioners by selecting their area of interest. Counselling for Children and Young People (CCYP) is a division of the BACP and supports counsellors working with children and young people including producing best practice guidance.¹¹

¹¹ BACP Find a Therapist
http://www.bacp.co.uk/seeking_therapist/

6. Discussion

- 6.1 In this section the HPC Executive have discussed what appear to be the main issues in this area as they relate to professional regulation.
- 6.2 In summary the most salient arguments for and against differentiation between those qualified to work with children and young people and those qualified to work with adults are as follows:
- 6.3 For:
- The risk of harm to a vulnerable section of society.
 - The need to meet the specific needs of children and young people.
 - The need to recognise specific training, delivering specific competencies in order to protect the public.
- 6.4 Against:
- There is no greater justification for recognising this group compared to practitioners working with other client groups.
 - There are a variety of different entry routes into work with children and young people, not just formal entry-level or post-registration training.
 - The responsibility for ensuring competence to work with any client rests with individuals and their employers.
- 6.5 However, this paper has discussed how such an absolute distinction is not possible. The salient question is not about whether those qualified to work with children and those qualified to work with adults should be differentiated but whether there are distinct groups working with children and young people which should be and can be reflected in the structure of the Register.
- 6.6 Overall, it might be observed that in this debate overall, in particular, in responses to the consultation given the broad terms of the question, some of the issues and arguments have become conflated. For example, some of the arguments made in the consultation conflated the issues pertinent to professional regulation with those arguably more relevant to institutional regulation, education commissioning and service delivery. This paper is an attempt to be clear about some of the key debates and issues as they pertain to regulation.
- 6.7 This debate is not about:
- questioning whether the safety and wellbeing of children and young people is important;
 - questioning whether different skills and competences are necessary when working with children and young people; or
 - seeking to unfairly restrict the ability to work with children to a small part of the workforce or about restricting service providers' ability to deliver services for children and young people.

6.8 This debate is about whether:

- there is a case for specific actions that **can** be taken at the level of registration which might better protect the public; and
- there is a case for specific actions that **should** be taken at the level of registration (in that they are necessary, proportionate, realistic and equitable).

6.9 Overall, it can be observed that regulation is only one part of a much wider system, including service providers, employers, professional bodies and the innate ethics of practitioners that collectively helps to ensure that the needs of children and young people are met and their rights safeguarded / protected.

6.10 In summary professional regulation in this area would mean the following.

- Setting standards related to a distinct group(s) of practitioners working with children and young people.
- Protecting title(s) that relate to those standards and those distinct groups of practitioners.
- Approving programmes that deliver those standards.
- Registering people who successfully complete those programmes.
- Employers and others could check that someone was registered, fit to practise and able to use a protected title or titles.
- Protecting the public through the above and by considering allegations about the fitness to practise of someone on the Register.

6.11 In summary, professional regulation would not (directly at least)¹²:

- Increase the availability of 'entry-level' or 'post-registration' programmes that equip practitioners to work with children and young people.
- Increase the availability of CPD opportunities to equip practitioners to work with children and young people.
- Increase the availability of services delivered to children and young people.
- Create an absolute distinction whereby only certain groups of practitioners could work with children and young people.
- Prevent employers from making fitness for purpose decisions about who they wish to employ, as they do now.

¹² It is acknowledged that professional regulation might contribute towards the improvements outlined in the first three bullet points above. However, the aim and purpose of professional regulation is public protection rather than directly these aims. For example, the HPC approves education and training programmes, it does not fund, commission or run training programmes itself.

- 6.12 The HPC Executive suggests that there are two main questions for the PLG to consider.
- 6.13 The '**feasibility**' question
- Is differentiation between practitioners qualified to work with children and young people and those qualified to work with adults **logistically possible**?
 - Is there a **discrete group**, with a **specific qualification** or qualifications that deliver **specific competencies** which lead to a **specific title** and a **specific role**?
 - Is that qualification **commonly recognised** by the field as required in order to perform those roles and to typically use that title?
- 6.14 The '**in principle**' question
- Is it **necessary** or **appropriate** to differentiate at the level of principle? Would it be **fair and equitable** to do so (e.g. compared to the needs of other client groups or modalities)?
 - Would it **enhance public protection** or are existing safeguards sufficient? Would it be **understood** by members of the public or would it make the regulatory system **unnecessarily complex**?

Psychotherapists

- 6.15 In the consultation, the most frequently cited group was child and adolescent psychotherapists. It was argued that this was a distinct group, with specific education and training leading to a specific title and specific roles within the NHS and other sectors.
- 6.16 It appears that child and adolescent psychotherapists may meet the 'feasibility test' for regulation, as they are a discrete group and there are specific education and training programmes, leading to the specific title of 'child and adolescent psychotherapist' and specific roles as a child and adolescent psychotherapist. This would additionally rely upon being able to produce differentiated standards of proficiency outlining the skills and experience necessary to use this title. We understand that there are some modality specific programmes which equip psychotherapists to work with children on entry to the profession, as well as post-qualifying programmes.
- 6.17 The argument for including child and adolescent psychotherapists in the structure of the Register is different from saying that only psychotherapists with specific entry level or post-qualifying training should work with children and young people. Many practitioners may have developed the competencies to work with children and young people through experience and CPD and do so within their scope of practice and within the modality or orientation in which they practise.
- 6.18 In the consultation no arguments for other specific groups in the area of psychotherapy were advanced. However, in considering the matter of whether the Register should be differentiated in principle the PLG may

wish to consider whether the arguments about this group are distinct from other modalities / orientations given the PLG's previous decision and the HPC Council's decision that the Register should not be structured to reflect modalities. It might be observed that there are a number of modalities where practitioners are trained to work with particular client groups, for example family therapists and relationship therapists.

- 6.19 In discussion at the meeting in September, the minutes record that the group discussed whether child and adolescent therapists were 'a clearly defined profession' and 'whether they were sufficiently defined as to warrant a separate protected title'. In particular, the group discussed the differences between this group and other psychotherapists who either at entry to the Register or through post-registration training are equipped to work with children.
- 6.20 Partly as a result of this discussion, the UKCP and ACP have worked together and produced standards of proficiency for psychotherapists working with children and young people (please see appendix 3). Please note that the appended standards refer to suggestions for changes to the HPC generic standards recently the subject of consultation. Any changes to these standards are a matter for the HPC Council.

Counsellors

- 6.21 Youth Access have argued that there should be a separate protected title of 'youth / young person's counsellor' or similar, because 'there are a distinctive set of core values, principles, standards, skills and knowledge required to work with children and young people' (see paragraphs 3.9 to 3.15 this document). In their presentation, Youth access highlighted that there was currently insufficient entry-level or post-qualifying training to equip counsellors to work with children and young people. They also suggested that regulation provided an opportunity to 'correct the deficits' rather than to 'regulate the mistakes'. Youth Access has also highlighted a variety of activities it undertakes including developing training programmes which are undoubtedly valuable in helping to develop the young people's counselling workforce.
- 6.22 The HPC Executive would make the following assessment of the feasibility of protecting this title / structuring the register in this way, with particular reference to the 'conditions' for differentiation set out in paragraphs 4.1 to 4.5 and the articulation of the 'parameters' of the debate and issue outlined in paragraphs 6.6 to 6.8:
- Although the argument has been made for protecting a distinct title (Youth / young person's counsellor), we do not have evidence to support its wide currency; and to support that there is a clear link between standards, specific training and a specific title. Although there exists a 'youth counselling workforce', the appended job descriptions indicate a variety of different specific titles in usage. They also indicate that employer requirements vary – a counselling diploma, or equivalent, is required, plus experience of working with

young people. In short, this indicates that employers are making fitness for purpose decisions rather than that a specific qualification or training is accepted as necessary before being appointed to posts under a specific title and then working with young people.

- In discussion at the PLG meeting, some members of the group, whilst acknowledging the importance of the youth counselling workforce and the work of organisations such as Youth Access in developing the workforce, concluded that it would not be possible to reflect them in the structure of the register, because it would not be feasible.
- The argument has been made that regulation would provide an opportunity to 'correct the deficits' in this area. For example, to correct the current situation in which there is insufficient entry-level or post-qualifying education and training that equip counsellors to work with young people (i.e. an opportunity to create a more stratified situation). However, this is beyond what regulation on its own is able to achieve (please see paragraphs 6.9 to 6.11) and the 'conditions' for differentiation set out in paragraphs 4.1 to 4.5 need to be met.

6.23 In summary, the HPC Executive has concluded that to date it has not identified any discrete groups in the counselling field with a discrete title that it would be possible to recognise in the structure of the Register. A variety of titles might be used to denote the specialism of a practitioner including the client group with which they work but to date we have not identified a title relating to a discrete group which is in wide currency and commonly recognised by employers and others. Instead, there are a wide variety of titles used and a wide variety of requirements for practitioners working with children and young people. Employers made fitness to purpose decisions about those practitioners who have the skills and experience to work with children and young people.

6.24 Whilst the availability of direct entry or post-qualifying training to work with children and young people may increase in the future, at the moment it does not appear that differentiation in the structure of the Register is possible. However, it is important to note that any such conclusion is not saying that it is unnecessary for practitioners to have the skills necessary to work with and meet the needs of specific client groups. However, it is to say, in terms of statutory regulation, that it appears that separate recognition in the structure of the Register is not possible.

Standards of proficiency

- 6.25 Standards of proficiency have also been a subject of debate when this topic has been discussed on previous occasions.
- 6.26 The following provides a summary of some the comments, reproduced from the minutes for the 30 September 2010 meeting:
- 'There was a concern that the current standards of proficiency are not written in a way to ensure that anyone working with children has the training and understanding of the legislation and developmental needs.'
 - 'The need to put in place standards of proficiency which relate to all professionals working therapeutically with children since certain skills are required which all psychotherapists and counsellors may not have.'
 - 'Some members of the group felt that separate standards of proficiency were not required for those working with children and since those standards were covered in the generic [by 'generic', this reference was also to the standards which would apply to all psychotherapists and counsellors] standards of proficiency.'
 - 'Concern was expressed that those skills required to work with children were not being met by the standards currently in place and this should be addressed by having specific standards of proficiency for those working with children. Additionally, by not having specific standards of proficiency in place there would be no jurisdiction for the HPC to deal with those professions not meeting the standards.'
- 6.27 With reference to the last bullet point above, It is worth noting, in the HPC's view, that in the absence of separate standards of proficiency for specific distinct groups working with children and young people (or generally) it could still effectively handle allegations about practice in this area. For example, allegations that a practitioner had worked beyond their scope of practice, lacked competence in this area or that a practitioner's conduct had been below that expected of a registrant or of another reasonably competent professional working in this area. Please see paragraphs 4.12 to 4.15.
- 6.28 The standards of proficiency are the threshold standards of proficiency for entry to the Register. There is therefore a link between the standards of proficiency and the individual parts and 'subsections' of the Register (and therefore a protected title). To illustrate, the standards of proficiency for arts therapists include standards for all arts therapists, for art psychotherapists only, for music therapists only and for dramatherapists only. There is clear link between meeting the standards and registration – e.g. someone completes an approved programme in art psychotherapy which meets the standards of proficiency and they are registered in the arts therapists part of the register with eligibility to use the relevant protected titles (in this case, art psychotherapist and art therapist).

6.29 In summary, standards of proficiency relate to:

- a part of the Register (and therefore a protected title(s), e.g. the physiotherapists part of the Register).
- a ‘sub-section’¹³ of a part of the Register (and therefore a protected title, e.g. diagnostic radiographer, therapeutic radiographer); or
- an annotation of the Register (subject to the current ongoing consultation about the approach the HPC should take; see paragraphs 6.33 to 6.38).

6.30 The link between the standards and the Register makes them meaningful in the HPC’s processes. For example, the education approval process ensures that someone who completes a programme has met the standards of proficiency for occupational therapy and therefore is fit to practise and can be registered as an occupational therapist.

6.31 The standards of proficiency for all counsellors and psychotherapists at entry could be written so that the standards reflect the key knowledge, understanding and skills relevant to working with children and young people. However, they would need to be written in a way so that all registrants, including those who do not undertake training in this area at entry, could meet them. In the draft standards produced and included in the papers at this meeting, standards have been included about understanding the importance of the skills necessary to work with these groups. For example, the counselling draft includes a standard in the following terms:

- i. 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*

6.32 If a specific distinct group, with specific education and training and a specific title was identified, where it was felt that specific recognition in the structure of the register was both feasible and desirable, it would be necessary to produce standards of proficiency – the threshold standards for entry to the Register for that group and for eligibility to use the requisite protected title.

¹³ The term ‘sub-section’ is shorthand used in this document to refer to the different areas of each part of the Register used for the purposes of clarity, and is not a term that is used in legislation or that the HPC would typically use.

Annotation of the Register

- 6.33 In the discussion, a debate has emerged about the potential for annotation of the Register. This has also been raised with the Executive, particularly with regard to whether the Register could be annotated to identify all psychotherapists (including child and adolescent psychotherapists and others) who have undertaken training (at entry or post qualifying) to work with children and young people.
- 6.34 The HPC has powers to annotate the Register to indicate where someone holds a qualification or specialism. The Register is currently only annotated where someone has undertaken a programme which allows them to prescribe. Annotation is required by legislation before someone can undertake the functions of a prescriber or access certain medicines.
- 6.35 In the HPC's view, it is important to be very clear about the meaningfulness (and impact) of any entry or annotation in the Register, including what this means or does not mean for practitioners and for members of the public. Accordingly, the HPC is currently consulting (closing date 1 February 2011) on its broad approach in this area.
- 6.36 The following principles have been established:
- The Register should be annotated to show more qualifications but only in exceptional circumstances, i.e. only where annotation would improve protection of the public.
 - We should directly approve post-registration qualifications and develop standards of proficiency for those qualifications, building on existing systems.
 - The annotation of a post-registration qualification should be meaningful for both the public and registrants.
 - The annotation should not prevent the development of the professions or development of practice.
 - Any policy on post-registration qualifications should apply to all the professions we currently regulate and any professions which might be regulated in the future.
- 6.37 The following are the 'criteria' for annotation proposed in the document. 'A qualification would be annotated on the Register where:
- there is a clear risk to the public if the Register is not annotated;
 - the risk could be mitigated through annotation of the Register and could not be mitigated through other systems;
 - the post-registration qualification is necessary in order to carry out a particular function or role safely and effectively;

- there is a link between the qualification in question and a particular function or professional title which could be defined and protected by the HPC; and
- the post-registration qualification could only be accessed by statutorily regulated individuals.'

6.38 **Annotation of the Register is not within the PLG's terms of reference.** As such, the PLG is not asked to make any conclusions regarding annotation of the Register.

7. Conclusions

7.1 The PLG is invited to discuss the information included in this paper and the discussion in section 6. The PLG is also invited to consider the information, evidence and views of those groups that have been invited to present on this subject.

7.2 The PLG is invited to:

- consider whether there are specific groups of practitioners working with children and young people for whom it would be **feasible** to identify in the structure of the Register, to include child and adolescent psychotherapists and any other groups of psychotherapists and counsellors; and
- consider the **principle** of identifying those groups in the structure of the Register.



Supplementary Information to Youth Access presentation

Key reasons and principles for a specific protected title for a ‘young person’s/youth counsellor and/or recognition on the register of specialist youth counselling training

Is it simply a question of the Regulator HPC protecting the health and well-being of young people, a matter of principle, or perhaps both?

Youth/Young Person’s counsellor is a historically recognised title

1. What’s in a historically recognised title?

Youth Access argues consideration should be given to protecting the title of youth/young person’s counsellor or similar because there are a distinctive set of core values, principles and standards (see appendix 1), skills and knowledge required to work with young people - and that as a minimum the register should recognise the specialist youth counselling training undertaken by the majority of the youth counselling workforce (see flyer attachment of YA’s youth counselling training programme).

Background to common usage of the term ‘youth, young person’s/youth counselling services and/or counsellors’

- 1.1 Youth Access the national membership and infrastructure organisation for over 250 Youth Information, Advice, Counselling and Support (YIACS) agencies across England grew out of the youth sector 40+ years ago. (For more info about Youth Access go to Appendix 1)

Youth Access’ staff structure resembles its membership of Youth Information, Advice, Counselling and Support Services (YIACS), therefore, staff titles include Development Manager - young people’s counselling, Development Officer – young people’s counselling.

- 1.2 Youth Access and YIACS have their roots in youth work and counselling, and have developed a distinctive set of values, principles, standards and training for young people’s counsellors.
- 1.3 By drawing on the different traditions of youth work and counselling, YIACS have successfully developed an approach to developing and producing counsellors that are equipped to work effectively with young people. Within the children and young people’s sector and amongst young people accessing YIACS these counsellors are commonly known as youth/young person’s counsellors.
- 1.4 YIACS represents the largest youth counselling workforce in the country, typically employing between 12 to 50 paid and unpaid counsellors within the 250 agencies in membership.

- 1.5** Youth Access in consultation with its members developed a set of nationally agreed values, core principles and quality standards (1998) which YIACS agree to abide by in the services established for and interventions offered to young people .

The Youth Access National Quality Standards provide definitions for services (YIACS) and interventions (e.g. counselling) that are offered to young people.

“The provision of any of the helping services listed below requires appropriately trained and supervised staff to work with young people”.(YA National standards 1998)

1.6 *National definitions of youth counselling and counselling assessment for youth counsellors, managers and supervisors working in YIACS settings:*

Youth Counselling

Counselling is an activity voluntarily entered into by a young person who wants to explore and understand issues in their lives which may be causing difficulty, pain and/or confusion. The boundaries of the relationship are identified and an explicit contract agreed between the young person and the counsellor. The aim is to assist the young person to achieve a greater understanding of themselves and their relationship to their world; to create a greater awareness of their personal resources and of their ability to affect and cope with their life.

Counselling Assessment for Young people

A counselling assessment is a respectful, collaborative and transparent process in which the counsellor ensures young people are central to the process and feel heard and understood. It seeks to maintain a balance between gathering sufficient information to understand the young person’s needs and providing information about what help is available. Young people explore with the help of the counsellor their difficulty/pain and/or confusion and how it affects their life, what changes they want, their strengths; hopes for the future and how counselling might help. This information enables the counsellor and young person to consider whether counselling would be helpful or appropriate, or if access to a different YIACS service or a supported referral to another agency would be more beneficial. The counsellor explains relevant aspects of agency policy on confidentiality, information sharing, counsellor allocation, waiting times and internal and external referrals.

1.7 *YIACS results from a snapshot consultation on common usage of the term young person/youth counsellor in the recruitment process*

Q. When you advertise for a counsellor post do you specify it is for a young person/youth counsellor?

Norfolk.gov.uk	yes	
Streetwise north	Yes	
Youth counselling Centre	Yes	
Children and YP services	Yes	
Off the record Croydon	Yes	
Off the record	Yes	
Visyon	Yes	
Youth Service	Yes	
Off Centre	Yes	
YPSF	Yes	
YDS		No
Face2face	Yes	
Community Links	Yes	
The Market Place	Yes	
Youth Start	Yes	
Reigate & Redhill YMCA	Yes	
Hounslow Youth Counselling	Yes	
Poole Quay Advice and Counselling	YES	
YWCA Wolverhampton Cent	Don't advertise but would say yes if we were going to adverti	
Relate C+YPs service	Yes	
Haven Hartlepool	Yes	
Croydon Drop-in	Yes	
HYPE	Yes	

Q. Do you have difficulties recruiting counsellors specifically trained to work with YP?

Norfolk.gov.uk	Yes	
YouthReach	Yes	
Streetwise North	Yes	
Youth counselling Centre		No
Children and YP services	Yes	
Off the record Croydon	Yes	
Off the record		No
Visyon	Yes	
Youth Service	Yes	
Off Centre	Yes	
YPSF		No
YDS	Yes	
Face2face	Yes	
Community Links		No
The Market Place	Yes	

Youth Start	Yes	
Reigate & Redhill YMCA		No
Hounslow Youth Counselling	Yes	
Haven Hartlepool	Yes	
Croydon Drop-in		No
HYPE	Yes	

1.8 *Some YIACS within Youth Access’s membership have been operating for 20 years and some for over 30 years*

Names on buildings, information about the service in leaflets and posters, service information on the agency’s website and in the directory of YIACS on the Youth Access website – all commonly use similar terms, words and language to describe that the service/s provided as specifically for young people only - (between 11 and 25).

Extracts taken from random examples of descriptions of YIACS information on public websites:

“Off Centre offers *Counselling, Therapy, Advice & Info for Hackney’s Young People*
Off Centre is a counselling, therapy, advice and information service for anyone aged between 11 and 25 who lives, works or studies in Hackney. Our services are free, confidential and aimed at helping Hackney’s young people to have greater control over their lives...”

“The Zone *Is a free, friendly and confidential service for 13 - 25 year olds in Plymouth and the surrounding area. We can help you with many different issues offering: information and support, Counselling, sexual health, youth carers support, detached youth work and housing and homelessness.”*

“Drop In *is a charity, works with the young people of Croydon, aged 11—25 providing a talkbus, counselling, outreach, advice and advocacy and information.”*

2. *The youth/young people's counselling workforce differs because ...*

Youth counsellors working within YIACS are a distinct and specific group of counselling practitioners - inducted into and trained to work with 11 to 25 year olds in young-people friendly services.

2.1 *Why counselling for young people – (nationally evidenced historical need)*

“Voluntary sector provision is a key component in the provision of counselling services to young people..Youth Information, Advice, Counselling and Support Services (YIACS) are the largest provider of young people’s counselling services across the UK. Often operating from high street- based premises , and based on the ‘under-one roof’ or ‘one-stop’ model, these services provide free counselling via many different routes for young people.”(National Children’s Bureau, Research Highlight Briefing no.239)

“Adolescent mental health in the UK is deteriorating ... Emotional problems such as depression and anxiety have increased for young people generally since the 1980s.” (Ann Hagel, (2004). (Time Trends in Adolescence. The Nuffield Foundation).

“Mental health problems: affect 20 to 30% of children and young people... mental health disorders in around 10% of children and young people and mental illness affects 1 to 2% of children and young people and are more common in young people than in children. “

(BMA. 2008 Child Adolescent Health)

A 2005 NICE press release stated that an estimated 3% of adolescents suffer from depression in any one year. Symptoms include sadness, irritability and loss of interest in activities. Associated features include changes in appetite; sleep disturbance and tiredness, difficulty concentrating, feelings of guilt, worthlessness and suicidal thoughts.

The former Social Exclusion Unit’s report *Transitions: Young Adults with Complex Needs* (ODPM, 2005) concluded:

“There is a wide consensus among service providers within the voluntary and community sector that psychological therapy or counselling for young people – on issues like depression, eating disorders, or bereavement – can be beneficial ...There is evidence that young adults benefit from counselling when they receive it”

The above SEU report on young adults with complex needs highlighted services that can look at the person and the range of the problems they face, and which work collaboratively and across organisational boundaries. Youth Access and several YIACS are highlighted in the report as promising examples of services that overcome access issues and stigma, as well as being culturally appropriate. YIACS are described as good examples of holistic services pulling together to work with young adults with complex needs under-one-roof

“ Something that is going to support you in work and housing but also like mentally counsel you and help you – so it goes through everything.” (YP,ODPM, 2005)

2.2 *Youth Counsellors work in a nationally evidenced and distinct service context – delivering a different service model that can offer provision and interventions which are responsive to the whole young person’s needs*

Why offer counselling in Youth Information, Advice, Counselling and Support model?

“Young people seeking help for emotional and mental health needs/problems can easily drop-in or self refer to a professional counsellor or other mental health services in a non-stigmatising young people-friendly setting. This style of service provision fits well with the growing evidence about what young people want from services and find acceptable (and thus are likely to engage with.”

(Street C Dr. 2004, Mental Health services, What Children and Young People Want - NCB)

“The majority of YIACS provide a comprehensive under-one-roof service model which offers a combination of free, easy to access, responsive, universal and targeted specialist counselling services, as well as advice, information, outreach, and personal support to young people in a holistic framework of early intervention and prevention. Most YIACS operate in young people friendly shop-fronted high street settings.”(YIACS Key Findings Briefing YA 2006)

YIACS provide additional added value to young people accessing counselling by also offering quick and easy access to a range of other services within the agency:

“Young People’s Information, Advice and Counselling services (YIACS) ... are generally non- statutory services and are often provided by voluntary sector organisations ... within a national quality standards framework. YIACS generally provide a range of services for young people, helping with problems such as drugs, issues around homelessness and sexual health, as well as mental health issues. These services tend to be very young-person-focused and accessible, featuring drop-in services, a one-stop-shop approach, and self referral. “
(Young Minds Stressed Out and Struggerling. 2006)

“Counselling offered in a YIACS-type setting is not restricted to one model and offers a range from holistic, through to person-centred, humanistic, solution focused, psychodynamic, analytic, cross-cultural and cognitive.”(BDBP a Strategy in Development Key findings, 2002)

2.3 YIACS agree to abide by the delivery of services to YP within a core set of values, principles and standards

Statement of core values and principles:

Youth Access members agree to provide services that:

- **respect the dignity and self-worth** of each young person
- respect and value **individual differences**
- recognise and be sensitive to the **growing autonomy** of each young person
- respect every young person’s **right to be a voluntary participant** in any helping process
- recognise the potential of each young person

Statement of Core Principles

- Young people are **central to the service** and member agencies are **committed to responding to their needs**.
- Member agencies believe that young people have a **right of access to quality information, advice and counselling services**.
- The basis on which young people are able to make use of a service is **made clear** to each of them individually and a contract is agreed where appropriate.
- Member agencies of Youth Access **aim to empower young people and treat them with respect** based on **an understanding of their individual culture and background**.
- In all aspects of their work, member agencies of Youth Access **aim to counter the oppression and discrimination** faced by young people.
- Member agencies of Youth Access are **working towards equality of access for all young people** for whom their service is designed.
- Member agencies of Youth Access take all reasonable steps to ensure the **safety and well being of young people and workers** in an agency.
- Member agencies of Youth Access are committed to ensuring their workers are **competent to perform the range and depth of duties** offered by the agency and provide a framework for staff development that includes **support, supervision and training**.
- Member agencies of Youth Access are committed to establishing and maintaining procedures for **monitoring and evaluating the service they provide**.

Youth Access Quality standards (see Appendices)

The Youth Access Quality Standards and 360 degree Self Assessment Materials are designed to help agencies recognise their strengths and identify areas for improvement in their practice. The manual offers a strategic approach to implementing quality within YIACS , and assessing practice and delivery from the perspective of young people, board members, key stakeholders, managers and practitioners.

Youth Access were one of the pioneers of standards development in the youth sector in 1998. The standards have increasingly gained national credibility (by Ofsted and commissioners) and are widely used and recognized across the voluntary, community, youth and public sectors.

There are 17 standard areas, which a youth information, advice, counselling and support agency may encounter. (For details of standard areas go to: www.youthaccess.org.uk)

2.4 Youth Access provides a specific and specialist training programme to produce a youth counselling workforce 'fit to practice' - ensuring counsellors are equipped with the necessary theory, skills and knowledge to work with 13 to 25 year olds – bridging the existing training gap

Youth Access and YIACS historical experience of trained counsellors entering the workforce was and continues to be that they are not fit to practice with YP, because there remains insufficient entry-level or post-qualification education and training courses available to adequately equip practitioners with the theory, skills and knowledge to work with young people. The majority (90%) of current PGDips are adult focussed and create a workforce trained to provide counselling to adults in adult settings.

To plug this gap, Youth Access has delivered over a period of 20 years a specialist youth counselling training programme targeted at diploma trained counsellors to ensure they are fit to practice with young people. Prior to the development of Youth Access's national training programme for YIACS some member agencies historically designed and delivered specific youth counselling training locally, in conjunction with their local university for example, Map in Norwich.

2.5 Youth Access Counselling Courses Accredited at Masters Level (M level) - leading to a distinct set of competencies for counsellors working with young people

An independent youth counselling national workforce study conducted in 2007 (funded by the Children's Workforce Development Council) with managers, practitioners and YP in YIACS , published in 2008, made a number of recommendations for the youth counselling workforce.

The recommendations were based on ensuring the development of a distinctive youth counselling workforce 'safe and fit to practice' with young people not simply fit for purpose. These included to:

- Redress the gap in availability of courses for counsellors trained to work with adults who want to work in young people's settings and are ill-equipped to do so.
- Maintain, develop and expand a sought after and highly regarded programme of training for post qualified counsellors working with young people.

- Develop a highly skilled, appropriately trained youth counselling workforce, capable of working positively and sensitively with a wide range of young peoples' emotional and mental health needs.
- Expand the diversity of the young people's workforce by providing accredited, certificated, affordable training at the right level for counsellors working with young people.

And to:

- Design and develop a national programme of on-line induction training for local providers of youth counselling

2.6 *Youth Counsellor on-line induction programme for safe and effective practice with YP*

Youth counsellors, case work supervisors of youth counsellors and their line-managers can access a specialist induction which leads to the development of outcomes and demonstrates the achievement of competencies in the areas of:

- The Core Values and principles, standards and ethics and professional practice of working with YP
- Communicating and engaging with YP and assessing needs through the application of YP centred counselling assessment
- Managing counselling practice in youth counselling in the session, and in the context of accountability, supervision, training and development
- Working within the young people's workforce; The Youth Information, Advice, Counselling and Support structure and integrated working

Induction modules and exercises are linked to YA's profession-specific standards for youth counsellors, their case- supervisors and line managers working in YIACS.

2.7 *Youth Access M level Youth counselling training programme accredited by the University of East London*

The Youth Access accredited counselling programme comprises seventeen 1, 2 and 6 day counselling courses

Suitable for: Diploma Level Trained Counsellors

Participants seeking a qualification and credits for courses attended at Youth Access are able to:

- gain credits at Masters level (M level)
- on successful completion gain 5 credits for a 1 day course or 10 credits for a 2 day course at M level
- be awarded an Associate Certificate from UEL bearing the name of the course and the number of credits gained at M level (for each course)
- accumulate 120 credits on the YA counselling course programme and apply to APCL in order to progress onto the final dissertation module of a relevant Masters degree programme at UEL (or similar at another university)
- enrol as a student at UEL.

Youth Access Counselling Programme Course Areas and Titles

Youth Access has divided its training programme into three headed course areas, all focussed on counsellors working with young people comprising:

1. Counselling young people
2. Counselling and mental health of young people
3. Management issues and clinical supervision for managers and supervisors working with young people

Trained counsellors new to working with young people are recommended to take the courses in each of the headed areas before moving onto the next area,

The Modules were developed out of Youth Access's existing training programme and accredited at MA's level to develop the youth counselling workforces' knowledge, thinking skills; subject based practical skills and skills for working with in YIACS.

All the modules are targeted specifically at counsellors trained to diploma level to provide counselling, clinical or management supervision safely and effectively in YIACS type settings

- **Counselling Young People: An Introduction**
- **Effective Counselling and Risk Assessment working with young people**
- **Assessing Risk and Resilience in the Counselling Assessment Process**
- **Nurturing Young People's Mental Health through the Counselling Relationship**
- **Working Creatively to Engage Young People in the Counselling Process**
- **Introduction to Attachment Theory and Adolescence**
- **An Introduction to using Solution Focussed Approaches with Young People**
- **Counselling Young People who have Experienced or Witnessed Trauma in their Families or Relationships**
- **Working with Young People at Risk of Suicide in the Counselling Process**
- **Working through the Counselling Relationship with Young People who Self harm**
- **Understanding Identity, Exploring Differences and Challenging Prejudice**
- **Casework Supervisory Skills for Counselling Supervisors (3 courses)**
- **Ethical Decision Making and Quality of Care**
- **Understanding Safeguarding and Child Protection when Working with Young People**
- **Introducing Coaching Conversations to Support Young People's Self-Development**

Note: Part of the above programme could also be run as a PGDip to train counsellors at diploma level to work specifically with young people but would need to go through the UEL validation process as it previously did to successfully gain the M level validation.

See copy of course module flyer

2.8 *YP are not children nor are they adults*

“Current understanding of the young person’s brain points to the existence of a developmental period in which there is both an increased vulnerability to negative environmental experiences and enhanced receptivity to positive, including therapeutic and life experiences – both of which may carry long- term consequences for adult life.”

(Young Minds, (2006). *A work in Progress – the adolescent and young adult brain*. London: Young Minds.)

Young people have different ways of communicating and face different challenges and risks during adolescence in relation to brain development, the potential onset of complex mental ill health combined with the usual transition issues all young people go through on routed to full adulthood. Consequently they require access to a specific and specialist workforce trained to practice sensitively, appropriately and safely with young people.

(Nationally evidenced in a range of research illustrating all or some of the above – studies lead by Young Minds, NCB, the Mental Health Foundation, former SEU,DH, former DCSF, Youth Access and others including Kurtz, Rutter, Street)

“Research suggests the brain is still developing up to the age of 25 and beyond, with the early adult years critical to the formation of self image, social skills and impulse control. The timing of the ‘normal’ maturation of brain structures suggest that society’s expectations for young people’s planning, organisational and self-regulatory capacities can be misplaced. “

(YM Adolescent Brain 17 Young Minds, (2006). *Stressed out and Struggling. Emerging Practice: Examples of mental health Services for 16–25 year olds*. Young Minds.)

Appendices

Appendix 1

Youth Access Information Sheet

1. Role of Youth Access

1.1 Who we are



Youth Access is the national membership organisation for young people's information, advice, counselling and support services (YIACS) who predominately work with 11 to 25 year olds.

We are a small (8 staff) specialist second tier national infrastructure body, commonly known as an NVYO (part of the youth sector). We receive part of our main grant from the former DfES now DfE, NVYO pot.

Youth Access has a strategic alliance with the National Youth Agency (NYA) and works in partnership with Young Minds and the Mental Health Foundation, amongst others.

2. What we do

Youth Access believes that all young people have a right to locally accessible, free and impartial information, advice, counselling and support. We work in partnership with our members, the National Youth Agency and other organisations to promote the development of high quality; young people-friendly services.

We undertake a range of activities to represent and support YIACS work with young people. These include,

- developing and promoting quality standards in youth information, advice, counselling and support services
- representing the sector at national level through a wide range of forums and working groups across Government, the statutory sector and other voluntary bodies
- undertaking research projects to examine the provision, needs and access to youth information, advice, counselling and support services nationally.
- national directory of YIACS services on the www.youthaccess.org.uk
- training and networking opportunities for members and agencies working with young people

3. What are Youth Information Advice, Counselling and Support Services (YIACS)?

The YIACS MODEL

The majority of YIACS provide an under one roof service model which offers a combination of counselling, advice, information, outreach, and personal support to young people in a holistic framework of early intervention and prevention in:

- A confidential, non-judgemental and young-person-friendly service.
- A safe and secure environment.
- A continuum of helping interventions provided through multi-disciplinary teams for 11 to 25 year olds.
- Access to discrete counselling, information, advice, personal support¹ and outreach services
- Flexibility – can offer regular and occasional contact plus a seamless transition across services in-house based on need, at the young person's own pace with a variety of entry points.
- Self-referral to the agency and supported referrals for young people who need extra help accessing YIACS or being referred on to other services.
- Access to SMHS provision provided in a multi-agency young-person-friendly framework in some YIACS (for example, early intervention services for young people with psychosis).
- Respect and a service that values difference.
- Respect for the young person's right to be a voluntary participant in any helping process and recognition of each young person's potential.
- Information and support on obtaining external support for the family if requested.



Young People's Information, Advice, Counselling and Support Services

¹ Personal support services include a range of helping activities, including befriending, individual and group work to reduce a young person's sense of social and personal isolation with practical help to develop independent living skills.

Appendix 1 continued

Quality Standards and Self Assessment Materials

The Youth Access Quality Standards and Self Assessment Materials are designed to help agencies recognise their strengths and identify areas for improvement in their practice. The manual offers a strategic approach to implementing quality within your organisation, and is available to download free of charge (members only).

The Standards have been mapped against the Legal Services Commission's Quality Mark, the Connexions requirements and the Ofsted Inspection Framework for Connexions.

There are 17 standard areas, which a youth information, advice, counselling and support agency may encounter. The areas are:

1. Management
2. Line management supervision
3. Recruitment, Selection and Induction of staff
4. Training
5. Publicity and promotion
6. Initial access
7. Premises
8. Information Services
9. Advice Services
10. Counselling Assessment
11. Counselling Services
12. Other Personal Support Services
13. Referral
14. Case Records
15. Casework Supervision
16. Monitoring and Evaluation
17. Partnership working

These courses have been accredited by UEL

Youth Counselling Training Programme (M level)

Course Areas and Course Titles	Days	Credits	Module leader
A. COUNSELLING YOUNG PEOPLE			
A1. An introduction to Counselling Young people	2	10	Carolyn Mumby
A2. Young person centred Counselling and risk assessment (practitioners)	2	10	Carolyn Mumby
A3. Understanding Safeguarding and child protection	1	5	Amandeep Hothi
A4. Working Positively with Difference	2	10	Carolyn Mumby
A5. Working Creatively... in the Counselling process	1	5	Carolyn Mumby
A6. Solution Focused Counselling	1	5	Carolyn Mumby
A7. Introduction to coaching for counsellors	2	10	Carolyn Mumby
B. COUNSELLING AND MENTAL HEALTH			
B1. Nurturing young people's Mental Health..	2	10	Carolyn Mumby
B2. Trauma	1	5	Carolyn Mumby
B3. Self harm	1	5	Carolyn Mumby
B4. Suicide	1	5	Carolyn Mumby

B5. Eating Disorders	1	5	Carolyn Mumby
B6. Early Intervention Psychosis	1	5	Carolyn Mumby
B7. Understanding how domestic violence affects the lives of young people.	1	5	Amandeep Hothi
C. MANAGEMENT ISSUES AND CLINICAL SUPERVISION			
C1. Establishing effective Counselling and Risk Assessment systems and frameworks in your organisation	2	10	Carolyn Mumby
C2. Becoming a Casework Supervisor	2	10	Carolyn Mumby
Part I	2	10	
Part II	2	10	
Part III			
C3 Using Counselling Outcome Tools with YP	1	5	Catherine Wilson

Totals

28 days 140 Credits

Appendix 3 - Example of YIACS service

The Zone - Plymouth

Y.E.S. started in 1991, primarily as a counselling service for young people aged 13 to 25 in a street-based agency in the city of Plymouth. It is one of the largest YIACS in the country with eighteen different projects.

The agency's mission is to assist young people in living healthy, secure and satisfying lives, by enabling and supporting young people to make informed decisions. The service uses a holistic approach, providing needs-based services that aim to improve the economic, social and emotional well being of young people in the area.

Y.E.S. services include:

- **Insight** An early intervention service for 16 to 25 year olds experiencing their first episode of psychosis. A multi-disciplinary team: a community psychiatric nurse, OT, clinical psychologist, psychiatrist and key workers, work with young people experiencing severe mental health issues for up to two years. A recovery model is used to help young people manage their symptoms and to reduce hospitalisation.
- **Icebreak** A new multi-disciplinary team set up within YES to work with young people who have received a PDS diagnosis
- **Counselling** Ongoing person-centred counselling sessions, drop-in sessions in Y.E.S. plus outreach to geographically isolated areas and school based counselling for 13-25 year olds. The counsellor's task is to enable the young person to access their own inner resources rather than guide or advise them. (Registered for quality – implementing the Youth Access Quality Standards)
- **Accommodation, information and advice (including Benefits)** Aims to empower young people to secure accommodation to meet their needs and offers support in completing relevant forms, acting as a go between and advocate on their behalf.
- **The Junction** A sexual health advisory service designed for young people, including under 16's, providing access to a GP and nurse on site, offering contraceptive advice, free pregnancy tests, emergency contraception, and information on sexually transmitted infections.
- **Sure Start Plus** Based at Y.E.S. and working with young teenage parents and pregnant teenagers.
- **Street Legal** A solicitor is on site once a week for young people who need free legal advice.
- **Personal Development** programmes are run by staff certified by the Adventure Activities Licensing Authority, Raleigh International and offer a range of programmes which enable young people to increase their self-confidence and build on their skills through a range of outdoor activities, youth achievement schemes and personal development.
- **Volunteer Training** Volunteers are an integral part of Y.E.S. Often the training they receive at Y.E.S. can be the first step towards training for a career in caring or community work. Many volunteers go on to complete higher education courses or find employment.
- **Child Advocacy** A service for young people who would like the support of a Child Advocate at an impending Child Protection Case Conference, or a statutory review for 'looked after' young people. The opportunity is available to access other support, information or counselling from in-house services.
- **Youth Mentoring** A project to build positive, trusting and supportive relationships with young people who may have been in trouble with the law. Mentoring provides an unbiased adult to listen to their point of view and take time out to understand them. The project matches up young people with adult mentors to provide support.
- **Appropriate Adults** This project works in conjunction with the Plymouth Youth Offending Team ensuring the rights of young people aged 10-16 are adhered to whilst in police custody, making sure the interview is conducted fairly and the young person gets legal advice. Follow-up support and links to other Y.E.S. services are offered.

Training calendar cont. 2011

September

20-21

Working Positively with Difference (exploring identity, acknowledging and working with difference and challenging prejudice in the counselling assessment)

October

4-5

Nurturing Young People's mental health through the counselling relationship



In-house Training: Wherever you are, we can deliver our training to you!

Benefits include: -

- **Tailored Learning** – We will **tailor** our training to ensure we cover the areas **you** want to focus on.
- **Building Relationships in your team** – Learning together develops both a common understanding and purpose, and as an added value builds the relationships in the team. This can be particularly important where you have a number of part-time paid and volunteer staff.
- **Working with other local partners** – If the numbers in your team are too small to make an in-house event viable, then we are happy to help you draw in staff from other local agencies. This will help to ensure the training is cost effective and bring the added bonus of helping you **build up** local networks and sources of support.
- **More effective and flexible learning** – We are able to run **longer courses** with time in between to reflect on your practice, and then bring any concerns back to the training group.

For details of the full range of courses on offer, please see www.youthaccess.org.uk/events.
Rates are competitive, and Youth Access members receive a generous discount.

Please contact **0208 772 9900** or email admin@youthaccess.org.uk if you would like to have a chat about Youth Access training, for your team, at your premises.

Join Youth Access and save up to 50% on training

Youth Access members receive **generous discounts of up to 50%** on our training programme and in-house training, plus invitations to **free training events**, and national **networking events**.

In addition, our members receive a **wide range** of membership **benefits**: email bulletins, monthly **Funding News** and **Policy Digests**, research, policy and good practice **briefings**, and access to exclusive **resources**.

SPECIAL OFFER: Join Youth Access before end of December 2010 and get 3 months membership FREE!



For all Youth Access courses and to book place your place visit www.youthaccess.org.uk/events
For details about joining Youth Access please visit www.youthaccess.org.uk/join

youth ACCESS

Specialist training for advice and counselling practitioners working with young people

A diverse programme of counselling courses accredited by the University of East London

Courses on skills and knowledge areas for advisers

In-house tailored specialist training at affordable rates

Join Youth Access and save up to 50% on training, plus 3 months free membership



www.youthaccess.org.uk



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ACCESS**

January – July 2011 Training Programme

11 January 2011 – London Counselling Young People who self harm

Aim: To develop participants understanding about why and how young people engage in self-harm, and in particular self-injury, and to explore ways of responding effectively to these issues within the counselling relationship.

1 day course
M (no credits) £65
M £75
V £100
S £150

"[The trainer] was highly skilled at facilitating the course and her materials were always excellent."

Accredited by UEL

16 February 2011 – London Counselling Young People at risk of suicide

Aim: To develop an understanding of how to work effectively in the counselling process with a young person who is having thoughts and feelings about suicide, including identifying the level of risk and establishing a risk management plan with the young person, and/or identifying when and how to refer on for further help.

1 day course
M (no credits) £65
M £75
V £100
S £150

"[the trainer] has a relaxed style, involves and explains clearly."

Accredited by UEL

16 March 2011 – London Exploring the issue of Young People with Eating Disorders

Aim: To develop understanding of the definitions, prevalence, causes and effects of eating disorders suffered by young people, and to explore options for treatment and recovery.

1 day course
M (no credits) £65
M £75
V £100
S £150

"I found the course informative, stimulating, creative and based on grounded ideas. The facilitation was of a very high standard and I found it very worthwhile."

Accredited by UEL

14-15 June 2011 – London Becoming a Supervisor (for existing youth counsellors) part 3 of 3

Aim: For experienced youth counsellors to develop a comprehensive understanding of the purpose, tasks and methods of clinical supervision. To practice skills development through use of Supervision process models, and identify next steps in becoming a supervisor of young people's counsellors.

2 day course
M (no credits) £130
M £150
V £200
S £300

Accredited by UEL

17 February 2011 – London Young People's Rights within the Education System – A Practical Approach to Advice

Aim: To develop participants' confidence to give initial basic advice and identify the potential for legal challenge for young people within the education system.

1 day course
M £55
V £88
S £110

ADVICE COURSE

"The course was very relevant to the line of youth work and has given me knowledge which can be transferred to both work and personal life."

Accredited by UEL

11 May 2011 – London Exploring Early Intervention Psychosis

Aim: To develop an understanding of how and when young people may present with symptoms of Psychosis, to recognise the importance of Early Intervention Psychosis (EIP), understand how EIP services work and how counsellors can refer and collaborate with them to provide support to young people at this crucial stage of intervention.

1 day course
M (no credits) £65
M £75
V £100
S £150

"I valued the Quality of course delivery and content and in particular the high quality and breadth of information in the resource packs for each module."

Accredited by UEL

21 June 2011 – London Introduction to using counselling outcome tools

Aim: To develop participant knowledge and an understanding of the range of counselling outcome tools, their purpose, benefits and appropriate use with young people. To explore the use of outcome data in: developing an evidence base; improving practitioner and agency practice; and whole organisational learning.

1 day course
M (no credits) £65
M £75
V £100
S £150

"Excellent: thank you for your hard work."

Accredited by UEL

24-25 January 2011 – London Developing effective systems for counselling assessment and risk assessment within the organisation

Aim: To develop a comprehensive understanding of the purposes of counselling assessment and its good practice, including the principles and tools of risk assessment, and to introduce or improve comprehensive young person centred assessment processes and systems within young people's counselling services.

2 day course
M (no credits) £130
M £150
V £200
S £300

Accredited by UEL

1-2 March 2011 – London Becoming a Supervisor (for existing youth counsellors) part 2 of 3

Aim: For experienced youth counsellors to develop a comprehensive understanding of the purpose, tasks and methods of clinical supervision. To practice skills development through use of supervision process models, and identify next steps in becoming a supervisor of young people's counsellors.

2 day course
M (no credits) £130
M £150
V £200
S £300

Accredited by UEL

"Fantastic! Learned so much and given so much to think about."



"A thoroughly enjoyable, challenging learning experience, well delivered and people focused. Excellent workshop – I am leaving feeling energised and enthusiastic."

7 July 2011 – London Understanding Safeguarding and Child protection when working with Young People

Develop your knowledge, understanding and competence in dealing with safeguarding and child protection issues and concerns, particularly when working with young people. Including current definitions, recognising signs and symptoms of abuse and neglect, the impact of child abuse and neglect, and more.

1 day course
M (no credits) £65
M £75
V £100
S £150

Accredited by UEL

8-9 February 2011 – London Developing a Coaching Approach – An introduction to coaching for counsellors of Young People

Aim: To enable counsellors of young people to develop an understanding of how their expertise as counsellors can form a foundation for a coaching approach to add to their repertoire of support for young people. The module will define and explore coaching in terms of similarities and differences to counselling, and will enable participants to develop a clear coaching framework and tools for use with young people.

2 day course
M (no credits) £130
M £150
V £200
S £300

Accredited by UEL

9 March 2011 – London Advising Young People on Housing and Homelessness – In partnership with Shelter

Aim: To develop participants' understanding of young single homelessness and the relevant legislative frameworks in order to increase confidence in using the law to advocate on behalf of young people in housing need.

1 day course
M £70
V £112
S £140

ADVICE COURSE

"I feel more confident and competent to give advice."

1 June 2011 – London Understanding how domestic violence affects the lives of Young People

Aim: To develop a comprehensive understanding of how domestic violence can affect the lives of young people, including related issues such as teenage pregnancy, sexual violence, gangs and barriers to accessing services. To explore and consider responses to young people as perpetrators and how to respond to disclosures and safety planning within a child protection framework including good practice guidelines for schools and youth settings.

1 day course
M (no credits) £65
M £75
V £100
S £150

Accredited by UEL

Youth Access counselling training: accredited by the University of East London

Youth Access's training for counsellors working with young people gives participants the option to gain **Master level credits**, as they train. Those who gain **120 credits** from successfully completing our one and two day courses will be able to apply to progress onto the final dissertation of a relevant Masters Programme.

This will allow counsellors to work towards a Masters Qualification at their own pace, spreading the training across one or several years: combining **affordable prices, flexibility and convenience**.

If you have **any questions** about accredited training, please contact Catherine Wilson at catherine@youthaccess.org.uk or by phone on **0208 772 9900**.



Price tariffs

Counselling courses: M (no credits): YA Members—do not wish to gain credits **M:** YA Members—do wish to gain credits **V:** Non YA members—voluntary sector / individual practitioners **S:** Non YA members—statutory sector / private practitioners
Advice courses: M: YA members **V:** Non YA members—Voluntary sector **S:** Non YA members—Statutory sector

The Case for Youth Counsellors

Barbara Rayment Director

Youth Access: Our Mission

We believe all young people have a right to locally accessible, free, confidential and impartial information, advice, counselling and support. We work in partnership with our members and others to promote the development of high quality, young people-centred services.

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ACCESS

What is Youth Access?

- **National network of Youth Information, Advice and Counselling providers for 35+ years**
- **Over 250 providers – qualified and in training; mix of paid and volunteer staff**
- **A strong voluntary sector driven development: ad hoc and fragile**

youth
ACCESS

Our work

- **Quality standards for organisations, underpinned by core values and principles**
- **Research and policy work**
- **Service development**
- **Training, including Masters Level CPD**

The purpose of regulation

- **HPC's job: to protect the health and wellbeing of people who use the services of the professionals registered with IT**
- **Register's purpose: regulate fitness to practise – the test of safe and effective practice**

What does this mean for young people?

- **What does safe and effective practice mean re. counselling young people?**
- **Are universal/generic standards of proficiency sufficient to secure the minimum threshold?**

Safe and effective practice

- **How to work with young people**
- **How youth counselling is different from working with adults**
- **Confidentiality – Gillick/Fraser competency**
- **Greater understanding of safeguarding responsibilities and procedures**

Workforce and Training Needs

- **Findings of a YA national study funded by the Children's Workforce Development Council (CWDC)**
- **Findings of a survey to inform the development of an induction resource**

The Training Gap

- **Majority of current training does not equip counsellors to work with yps**
- **Counsellors with no knowledge of how to work with yps and the legal framework**
- **Service induction – more than job orientation process**
- **For some, time spent counselling under 16s does not count towards their diploma**

“For my training only 20% of my clients can be under 18.”
Student Counsellor 2008

“50% of my clients must be over 16.” Student counsellor
2008

Why a separate title?

- **Equal treatment?**
- **Risks to health and wellbeing?**
- **An opportunity to correct the deficits or regulate the faults?**

1 July 2008

**XXXXX CENTRE FOR COUNSELLING AND PSYCHOTHERAPY
FOR YOUNG PEOPLE**

**DESCRIPTION OF SERVICES REQUIRED: COGNITIVE BEHAVIOURAL
PSYCHOTHERAPIST (Agenda for Change Band 8, range B, point 35-37)**

A. OUTLINE OF POST AND PRINCIPAL CONTRACT TERMS

Job Title	CBT therapist
Purpose of the post	The CBT therapist is expected to provide CBT for young people aged 12 to 21 with emotional and behavioural difficulties. The post holder is also expected to deliver anger management and problem solving therapy and to participate in the service's monitoring and evaluation activities.
Hours	17.5 hours per week (5 sessions). Hours of work must include 10.30 am to 1.30 pm on Tuesdays for clinical meetings, after school hours from 3.00 pm and two evening sessions until 6.30 pm or 7.00 pm.
Pension	The xxxx Centre offers to contribute 3% per annum of the post holder's salary to a private pension scheme organised by the Centre providing the post holder makes an equivalent contribution
Annual leave	28 days three of which must be taken during Christmas week when the Centre is closed.
Probationary period	6 months with appraisal at 4 months
Notice	1 month during probationary period, 3 months thereafter
Accountability	The post holder shall be accountable to the Council of Management of the XXXX Centre through the Director who will also line manage the work of the post holder.

B. AN OUTLINE PROFILE OF THE xxxxx CENTRE

Introduction to the Centre

The Director is responsible for the organisation and direction of the Centre and is accountable to the Council of Management. The XXX Centre has service level agreements with xxxx and xxx PCTs, the London Borough of xxxx , and receives grants and donations from London Councils, Department of Health, from Charitable Trusts and Corporations and fees for its services from other public bodies.

The objective of the Centre

The principal objective of the xxx Centre is to maintain and develop an accessible and flexible professional service in response to the psychological, medical, sexual and social problems of young people aged 12 to 25 years.

- a) To relieve distress, mobilise personal resources and facilitate growth in adolescents towards responsibility and self-fulfilment.
- b) To prevent or alleviate
 - i) Suffering caused by unwanted pregnancy
 - ii) Mental ill health, psychological disturbance and maladaptation in adult and future family relationships.

The xxxx Centre's service extends to a wide range of adolescent problems and is based on a psychoanalytic understanding of adolescent development. There is particular medical provision for contraceptive, pregnancy and psychosexual difficulties.

The work of the Centre

The work of the Centre covers four main activities:

- 1) **Treatment**
 - i) **Individual psychotherapy/counselling:** There are five part-time psychotherapists and one child psychotherapist working at the Centre and two part-time psychotherapists currently working at a youth centre in xxx. Their work includes brief consultation, short- term and long-term individual psychotherapy for young people seeking help with emotional and psychological problems. A psychotherapy referrals co-ordinator provides administrative and reception support. On average 350 young people use the service every year.
 - ii) **Contraception and sexual health service:** There are two part-time doctors, one of whom manages the service, and a nurse prescriber. They offer a holistic service for young people seeking help in relation to contraception, pregnancy sexual health and psychosexual difficulties. The service takes

account of the young person's emotional as well as medical needs. There is also a drop-in condom and chlamydia testing service delivered by the contraceptive and sexual health service co-ordinator and two part-time secretarial and reception staff. They also provide administrative support and work closely with the medical and nursing team. On average 1,500 young people use the service every year.

- iii) **Multisystemic therapy (MST) for families of persistent young offenders and teenagers with severe behavioural or emotional problems:** this is a home-based, community-based service helping parents to acquire new skills needed to change the behaviour of their child and improve family relationships. The therapists are available seven days per week and 24 hours per day. There is team of three Multisystemic therapists and a supervisor who manages the therapists. A part-time MST/Parenting Project Co-ordinator and a part-time Assistant MST/Parenting Project Co-ordinator support this service.
 - iv) **Structured parenting programmes for parents of teenagers with challenging behaviour:** this service offers a structured parenting programme in a group format that lasts between six to eight sessions and is run by two therapists, currently the MST supervisor and the director, who deliver the programme. The part-time MST/Parenting Project Co-ordinator and the part-time Assistant MST/Parenting Project Co-ordinator support this service
- 2) **Information**
The xxx Centre's administrative staff operates an extensive information service for both young people and professionals on a range of subjects concerning young people, which focus on mental health, contraception and sexual health.
 - 3) **Consultation and teaching** to both young people and other professionals in the community.
 - 4) **Research and Evaluation** into various aspects of service provision including mental health outcome and other service outcomes and emotional and behaviour problems in young people.

D. AN OUTLINE PROFILE OF THE POST

This is a new post at the Centre, which is designed to meet the needs of some young people with emotional and behavioural problems who may respond better to CBT and a solution focused approach than applied psychoanalytic psychotherapy. As well as providing CBT for young people, we would expect the post holder to have experience in providing anger management and problem solving therapy. There are increasing numbers of requests from referrers for anger management, which at present we cannot meet. We also expect the post holder to provide problem-solving therapy for younger adolescents that are referred either by professionals or by parents because the young person's behaviour is challenging or 'out of control'. This work would be done in conjunction with the parent attending a structured parenting programme that the Centre has successfully run for over three years.

Of 17.5 hours, twelve hours would be devoted to therapeutic work after 3.00 pm on between Monday and Friday (days to be agreed with the director) when, because of education or work commitments, demand from young people is highest. Three hours would involve attending the clinical team meeting on Tuesday for 10.30 a.m. to 1.30 p.m. One hour per week would involve individual supervision and one and a half hours would be available for administrative tasks, and monitoring and evaluation activities.

Efficiency in connection with administrative tasks, monitoring and evaluation activities is a priority as funders make ever-increasing demands on the Centre to provide evidence of output and outcome.

E. PRINCIPAL DUTIES AND RESPONSIBILITIES

1. Clinical
 - i. To provide consultation and assessment of degree of emotional and psychological disturbance in young people seen at the Centre.
 - ii. To provide as appropriate cognitive behavioural therapy, anger management and/or problem solving therapy.
 - iii. To provide consultation to parents.
 - iv. To maintain clinical records and to keep all client information confidential in accordance with statutory and professional standards and whenever there is the possibility that the confidentiality of these records might be affected to advise the Director before any change takes place.
 - v. To participate in weekly case discussions with the Centre's staff.
 - vi. To liaise with GPs, referrers and other professional workers as appropriate with the consent of the young person.
 - vii. To keep conversant with developments in treatment approaches and services for young people, with reference to the Centre's information resource and to add to this resource wherever possible.
2. Monitoring and evaluation

To participate in the monitoring and evaluation activities in the Centre.

3. Consultation

To provide consultation for other professional workers concerned with young people.

4. Personal responsibilities

- i. To maintain an active interest in and contribute to the development of the Centre's services and projects.
- ii. To undertake appropriate training to support a personal development plan.
- iii. To comply with Centre policies and procedures.

This job description is not meant to be exhaustive and the post holder will be required to undertake any other duties with the grading of the post.

F. CONFIDENTIALITY

All information concerning patients and staff must be treated as strictly confidential at all times. All members of staff are expected to sign a confidentiality agreement.

G. EQUAL OPPORTUNITIES

It is the aim of the xxx Centre to ensure that no job applicant or employee receives less favourable treatment on the grounds of sex, race, colour, religion, marital status or disability. To this end the Centre has an Equal Opportunities Policy and it is for each employee to contribute to its success.

H. HEALTH AND SAFETY

Employees must be aware of the responsibilities placed on them under the Health and Safety at work Act and to ensure that agreed safety procedures are carried out to maintain a safe environment for employees, patients and visitors.

I. NO SMOKING POLICY

There is a no smoking policy in operation at the Centre in accordance with recent legislation

J. REVIEW OF THIS JOB DESCRIPTION

This job description may be revised from time to time in conjunction with the post-holder to reflect changing service requirements.

**xxx CENTRE FOR COUNSELLING AND PSYCHOTHERAPY
FOR YOUNG PEOPLE**

PERSON SPECIFICATION

**CBT Psychotherapist – Agenda for Change Band 8, range point 35-37
Essential**

- | | |
|---|-----------|
| 1. Experience in working with adolescents and young people as a youth worker or social worker or in a similar capacity, which involves supporting and helping young people who experience personal, familial, educational or social difficulties. | Essential |
| 2. Accreditation with the BABCP or working towards BACBCP accreditation. | Essential |
| 3. Experience as a psychotherapist providing CBT, anger management and problem solving therapy for young people. | Essential |
| 5. Experience of and/or interest and ability to contribute to multi-professional service development. | Essential |
| 6. Ability to form good working relationships with others and to work in a multi-professional context. | Essential |
| 7. Hours of work must include 10.30 am to 1.30 pm on Tuesday for clinical meetings; after school hours from 3.00 pm two evening sessions until 6.30 pm or 7.00 pm. | Essential |
| 8. Familiarity with a multi-cultural perspective and experience of working with adolescents and young people from ethnic minority communities | Essential |
| 9. Experience of service monitoring and evaluation | Essential |

Job Description

Title of Post:	Youth Information, Advice & Counselling Worker
Base:	xxxxx City Wide Bases
Salary:	JNC 15 – 18, pro rata
Conditions of Service:	16hrs per week
Purpose of Post:	To offer information, advice and counselling to young people aged 11-25 in xxxx , supporting volunteers in conjunction with the Centre/Counselling Manager. To work primarily with young people with substance misuse issues.
Responsible to:	Counselling Manager
Limits of Authority:	To act within the policies and other regulations as laid down by XXX

Key Duties and Responsibilities:

- To be committed to the values of counselling and youth work.
- To provide an average of eight counselling sessions (which might be short or long term) per week to young people aged 11-25 across the XXXX Centres/projects.
- Assist with management of the counselling waiting list which will include pre-counselling assessments, arranging appointments and liaising with counsellors regarding their clients.
- To assist the Centre Manager in the on-going training and support of the current volunteers.
- To work with the Centre Manager, in developing additional services for young people.
- To identify informal learning opportunities that could be accredited and support young people to achieve this.
- Maintain general and counselling records, through the production of relevant reports and contribute to the monitoring and development of the service.
- Undertake NDTMS recording as required.
- To be responsible for ensuring that the centre/room is accessible, resourced, tidy and welcoming for young people.
- To participate in regular staff meetings, line management and clinical supervision, as agreed by the Centre/Counselling Manager.
- To represent XXXX at meetings and at community events when required.
- To work with other agencies for the benefit of young people.
- To assist with the volunteer recruitment, selection and initial training process.
- Participate in training as agreed with counselling manager and share with other staff/volunteers any new skills and knowledge.
- To keep up to date on the major issues that young people access support with – counselling, substance, money and benefits, family and relationships, health housing and homelessness.
- To demonstrate good practice and awareness under XXXX Equal Opportunities Policy and abide by all agency policy.
- To be aware of your responsibilities under XXXX Health and Safety Policy, and report hazards to the Centre Manager.
- To undertake any other duties the counselling manager deems required.

Any other tasks as reasonably required by the CEO or Management Committee within the scope of the post.

PERSON SPECIFICATION

Youth, Information, Advice and Counselling Worker

SPECIFICATION KEY: E= Essential App = Application Form D = Desirable Int =Interview Cert = Certificate Ref = Reference	E/D	HOW ASSESSED	SCORE
Counselling Diploma	E	Cert	
Local Youth Work Qualification or experience of working in a young person's organisation	E	Cert/Ref	
At least two years post qualification experience of face to face counselling in a youth organisational setting.	E	App/Int/Ref	
Ability to carry out pre-counselling assessments	D	App/Int/Ref	
Able to engage with and benefit from both group and individual counselling supervision.	E	App/Int/Ref	
Ability to work flexible hours and at different centres	E	App/Int/Ref	
Experience of working with people in a variety of settings & environments	D	App/Int/Ref	
Experience of working with people on issues such as family & relationships, health, promote healthy lifestyles, etc	E	App/Int/Ref	
Able to build trusting relationships with young people, enabling them to develop new skills and make their own informed choices	E	App/Int/Ref	
Able to offer accredited learning opportunities to young people and support them through the accreditation process.	D	App/Int	
Experience of working with young people around substance misuse issues.	E	App/Int/Ref	
Experience of working with people with mental health issues	E	App/Int/Ref	
Willingness to maintain, update and share skills and knowledge.	E	App/Int/Ref	
Able to offer support to the volunteer staff team.	E	App/Int/Ref	
Ability to contribute to training of staff/volunteers.	D	App/Int	
Experience of working with volunteers.	D	App/Int/Ref	
Able to undertake outreach work and represent the agency	D	App/Int/Ref	
Have IT skills and the ability to produce, reports & maintain records effectively.	E	App/Int/Ref	
Able to help young people complete forms and other written documents accurately.	E	App/Int/Ref	
Demonstrate the ability to work with difficult/complex behaviour and situations whilst under pressure.	E	App/Int/Ref	
Knowledge and experience of maintaining effective relationships with other agencies/organisations	D	App/Int	
Demonstrate effective organisational skills and good time management skills.	E	App/Int	
Demonstrate motivation and initiative in work practice.	E	App/Int	
Demonstrate the ability to work and communicate effectively as part of a team.	E	App/Int/Ref	
Demonstrate commitment to the principles and working practice of equal opportunities.	E	App/Int	

PERSON SPECIFICATION

Job Title: **COUNSELLOR (YSDF Project)**
 Grade: **Scale SO1**

ATTRIBUTES	NO	CRITERIA	ESSENTIAL/ DESIRABLE	HOW IDENTIFIED
EXPERIENCE & QUALIFICATIONS	1	Diploma in Counselling or equivalent	E	Application form/ interview
	2	Providing face-to-face short and long term counselling	E	Application form/ interview
	3	Conducting assessment of clients referred for counselling	E	Application form/ interview
	4	Working with vulnerable young people: for example young offenders, care leavers, women fleeing violence, ,young people who misuse substances or those with mental health issues	E	Application form
	5	Working with and facilitating groups	D	Application form/ interview
	6	Liaison with voluntary and statutory bodies	D	Application form
KNOWLEDGE AND/OR UNDERSTANDING	1	Issues affecting young people aged 13 -19	E	Application form and interview
	2	Crisis counselling techniques	E	Application form/ interview
	3	Safeguarding/ Child protection policies & procedures	E	Application form/ interview
	4	Awareness of ethnical considerations in relation to provision of counselling within an agency context	E	Application form/ interview
	5	Awareness of agencies and services for young people in the xxx areas of xxx	D	Application form/ interview
SKILLS AND ABILITIES	1	Ability to relate positively to young people	E	Interview
	2	Ability to identify and respond to the needs of young people in a proactive manner	E	Interview
	3	Ability to establish relationships and maintain dialogue with young people	E	Interview

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PERSON SPECIFICATION

Job Title: **COUNSELLOR (YSDF Project)**

Grade: **Scale SO1**

ATTRIBUTES	NO	CRITERIA	ESSENTIAL/ DESIRABLE	HOW IDENTIFIED
	4	Good verbal, listening and communication skills	E	Interview
	5	Ability to work with challenging behaviour	E	Application form/ interview
	7	Ability to employ assertiveness skills in an appropriate manner	E	Interview
	8	Good level of literacy and numeracy	E	Application form/ interview
	9	Administrative and organisational skills	E	Application form/ interview
	10	Ability to work on own initiative whilst retaining teamwork responsibility	E	Application form/ interview
	11	IT skills or the willingness to learn	E	Application form
ATTITUDES	1	Commitment to confidentiality	E	Application form/ interview
	2	Commitment to equal opportunities and challenging discrimination	E	Application form/ interview
	3	Non-judgemental attitude	E	Application form/ interview
	4	Commitment to enabling young people to reach their full potential	E	Application form/ interview
	5	Commitment to the supervision process	E	Interview
	6	Commitment to a client centred service	E	Interview
	7	Commitment to personal and professional development	E	Application form/ interview
	8	Willingness to work in a flexible manner and out of hours as necessary	E	Application form/ interview

HPC PLG for Psychotherapists and Counsellors - February 2011

UKCP and ACP propose the following additions to the generic standards of HPC currently under review:

16. Be able to recognise, to the degree appropriate to the regulated profession in question, the special needs of children and young people, with particular regard to safety of practice.

17. Be able to recognise that special and /or additional training is required with regard to work with children and young people, and to desist from such work where the health professional does not possess such training.

DRAFT SOPS FOR PSYCHOTHERAPISTS WORKING WITH CHILDREN AND /OR YOUNG PEOPLE (PCY) <u>INCLUDING ALL CHILD PSYCHOTHERAPISTS</u>	
1.	Be able to practise safely and effectively within their scope of practice
PCY1.1	Be able to understand and work with a range of mental health, psychological and psychosocial disorders and their presentations as they apply specifically to children and /or young people; be able to intervene effectively and be able to identify the need and make appropriate referrals where necessary
PCY1.2	Be able to establish, maintain and end a therapeutic relationship, including the ability to maintain appropriate responses to the emotional needs of children and young vulnerable clients; be able to identify where more specialist work is required to meet these needs appropriate to the context and needs of the vulnerable child or young person
PCY1.3	Be able to adjust theoretical models to the constraints of the service and setting in a manner that takes account of the needs of the child / young person including paying regard to family and /or care situations

PCY1.4	Be able to recognise any limitations of training, supervised practice and experience with this client group and be able to refer onto a child / young person specialist appropriate to the context and needs of the vulnerable child or young person
PCY1.5	Be able to identify the signs and symptoms of harm and abuse and be able to identify where specialist work may be required
PCY1.6	Be able to demonstrate an understanding of, and the competence to work with a range of issues arising from the development of children and young people, including issues of family dynamics and the impact of transitions of all kinds.
2.	Be able to practise within the legal and ethical boundaries of the profession
PCY2.1	Be able to respect and uphold, the rights, dignity, values and autonomy of clients including their role in the therapeutic process while safeguarding children and vulnerable young adults
PCY2.2	Be able to understand the need for balancing the rights of parents and carers with the rights and needs of vulnerable clients dependent on them
PCY2.3	With specific reference to the inherent powerlessness and dependency status of children, be able to recognise and manage the dynamics of power and authority in the therapeutic relationship appropriate to scope of practice; and be able to identify where more specialist work and/or supervision is required to meet the specific needs of the client
PCY2.4	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
PCY2.5	Be able to understand their specific professional therapeutic role in a range of different settings and service
PCY2.6	Be able to understand the importance of obtaining informed consent and to be able to assess the capacity of the client to give such consent
PCY2.7	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; and to be able to apply this within a multi-

	agency context
3.	Be able to maintain fitness to practise
PCY3.1	Be able to engage in a process of professionally-recognised continuous professional development relevant to their theoretical model, knowledge of development and scope of practice
PCY3.2	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
PCY3.3	Be able to understand and utilise regular supervision with particular reference to specialist areas and client groups involving children and young people applicable to model(s) and approach
PCY3.4	Be able to identify and manage their personal involvement in, and contribution to, the processes of therapy
4.	Be able to practise as an autonomous professional, exercising their own professional judgement
PCY4.1	Be able to assess motivation and capacity for psychotherapeutic work, be able to manage the range of conflicting demands of stakeholders, while allowing the client and stakeholders to be aware of the options available; including being able to identify where more specialist supervision and/or work may be necessary
PCY4.2	Be able to apply theoretical knowledge and understanding in developing explanations and initiating appropriate psychological and psychosocial therapeutic responses to clinical processes
PCY4.3	Be able to identify when psychological treatment may not be appropriate and be able to explain this in an appropriate manner to the child / young person and /or to the appropriate stakeholder, parent or carer
PCY4.4	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
PCY4.5	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
PCY4.6	Be able to use their theoretical training, clinical experience and supervised practice to reflect on and engage with complex, competing and contradictory information elicited from the client and stakeholders in order to develop an understanding of their problems and presentation and their origins, including ability to identify where more specialist work might be required, consistent with scope and capacity of practice
PCY4.7	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)
PCY4.8	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
PCY4.9	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
PCY4.10	Be able to use research and other evidence to inform, critically reflect on and evaluate their own practice
5.	Be able to practise in a non-discriminatory manner
PCY 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
PCY5.2	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
PCY5.3	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
PCY6.1	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; including understanding the position of the child in the family and the wider caring network, as perceived by respective cultures
PCY6.2	Be able to identify where specialist supervision, referral and / or further training might be required to meet the client need and situation as appropriate to their scope and capacity to practice with the specific client group
7.	Be able to maintain confidentiality
PCY7.1	Be able to manage complexities of information sharing, transfer and disclosure within a multi-professional context ; and 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 with children and / or young people
PCY7.2	Refer to 2.4
8.	Be able to communicate effectively
PCY8.1	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.

PCY8.2	Be able to communicate with children and young people in a manner appropriate to their cultural and social context and at their level of need, development and ability
PCY8.3	Be able to provide clients with the information necessary to enable them to give informed consent, wherever possible for the client to do so
PCY8.4	Be able to identify and communicate at the level of understanding of the client, and that of the parents / carer
PCY8.5	Be able to identify appropriate strategies to ensure and enable the client's full participation in the therapy, particularly when the therapist does not share the same language as the client
PCY8.6	Be aware of the characteristics and consequences of non-verbal communication and how this can be affected by socio-cultural differences and developmental maturity; be able to adapt communication approaches to meet these needs
PCY8.7	Demonstrate knowledge and skill in understanding and responding to the limited modes of communication that may be available to children and vulnerable young people; be able to identify where more specialist supervision, work or training may be required to meet client need in context of their scope of practice
9.	Be able to work appropriately with others
PCY9.1	Be able to build and sustain professional relationships and be able to work collaboratively with other professionals as well as with care givers and parents as appropriate to the work context and their scope of practice in relation to the specific client / client group
10.	Be able to maintain records appropriately
PCY10.1	With special reference to data protection and disclosure where minors are concerned, including the length of time

	records must be kept - 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
11.	Be able to reflect on and review practice
PCY11.1	Be able, where relevant in the case of children and young people, to help clients, their parents, carers and/or families reflect on their progress in therapy;
PCY11.2	Be able to identify the need for and utilise specialist supervision as required to deepen understanding of the work, to safeguard the clients and to maintain work within scope of practice
PCY11.3	Be able to advocate for the child/ vulnerable young person and enable them to communicate effectively with other parties involved in the management of their care; be able to identify the need and seek specialist support or referral for such work as may be required by the limitations of current scope of practice and /or vulnerability of the specific client
12.	Be able to assure the quality of their practice
PCY12.1	Be able to self-monitor, manage and maintain the quality of their practice; be able to ensure the needs of the child and / or young persons are paramount
PCY12.2	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 with children and / or young people
13.	Be able to draw on appropriate knowledge and skills to inform practice
PCY13.1	Be able to draw upon a body or bodies of psychological and psychosocial knowledge, specific to working with children and /or young people, that provide coherent and comprehensive frameworks for understanding their clients' presentations and for ways in which such understandings are communicated
14.	Understand the key concepts of the bodies of knowledge, which are relevant to their profession

PCY14.1	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
PCY14.2	Be able to evidence an awareness of the bodies of research focussing on children and young people with particular reference to: <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 in therapeutic work with young people, children and families • Institutional and group dynamics
15.	Be able to establish and maintain a safe practice environment
PCY15.1	Be able to provide a practice environment suitable for children and young people and to carry out and review risk assessment procedures in accordance with health and safety legislation and with sensitivity to specific client need

DRAFT SOPS SPECIFIC TO CHILD PSYCHOTHERAPISTS (CP) ONLY

(ALSO See above Draft SOPs for psychotherapists working with children and / or young people (PCY); PCY SOPs apply to ALL Child Psychotherapists. CP SOPs apply to child psychotherapists only)

1.	Be able to practise safely and effectively within their scope of practice
CP1.1	Be able to demonstrate a range of well-described skills that are derived from systematic training in theoretically well-documented child and /or adolescent psychotherapeutic model(s), and which have clear links to the body or bodies of knowledge that underpin the model(s) as appropriate to the age and developmental level of the child / young person client
CP1.2	Understand the role of parenting in relation to infant, child and adolescent mental health and how to work with parents to improve their functioning and benefit their child emotional and mental health, including work with the parent-infant relationship
CP1.3	Be able to work with adults in their role as parents differentiated from treatment of their adult psychological needs
CP1.4	Be able to work with carers (not birth parents) at the appropriate level
CP1.5	Understand typical and complex presentations of severe mental disorder, developmental disorder and disability in infants, children and adolescents
CP1.6	Understand and conduct appropriate assessment procedures in relation to severe mental disorder and developmental disorder in infants, children and adolescents
CP1.7	Understand and implement treatment methods to take account of symptoms and causes of developmental disorder and severe mental disorder in infants, children and adolescents

CP1.8	Understand the range of diagnostic frameworks and the complexity of the links between formal diagnoses and the impact of familial, social and environmental factors
CP1.9	Be able to identify, understand and work with a range of Special Educational Needs and situations of developmental delay, and to differentiate appropriately between interventions pertinent to these conditions as compared to interventions appropriate for mental, emotional or psychosocial disorders
CP1.10	Be able to establish, build, maintain and end a therapeutic relationship, including the ability to maintain appropriate emotional attunement, containment and safety in response to the emotional needs of children and young vulnerable clients
CP1.11	Be able to identify and work with a range of factors which have a differential impact on the developing psyche of children and young people, including the effect of trauma, neglect and physical, emotional and sexual abuse
CP1.12	Be able to identify the signs and symptoms of harm and abuse, including in the particular ways they manifest and are communicated by children and young people
CP1.13	Be able to demonstrate an understanding of the implications and effect of the use of medicines to treat mental and emotional conditions in children and young people, and be able to work with children who are on medication
CP1.14	Be able to demonstrate knowledge and an understanding of the range of issues arising as a result of the working out of needs and characteristics at different stages of child and adolescent development

2.	Be able to practice within the legal and ethical boundaries of the profession
CP 2.1	Understand how the developmental stage and mental health of the child impacts on informed consent and consult appropriately with parents/carers and professional networks
CP 2.2	Be able to interpret, put into practise and support other professionals in implementing current legislation on safeguarding and protecting children in a multi-agency context with the child's perspective in mind
3.	Be able to maintain fitness to practise
4.	Be able to practise as an autonomous professional, exercising their own professional judgement
CP4.1	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 including: a) Theories of attribution in respect of the difficulties encountered by young people and b) The impact of adult functioning on the physical, mental and emotional health of children and young people
CP4.2	Be able to assess family functioning in relation to children and young people and decide how to proceed in working to maximise benefit to the child, e.g.: work with parents, family, individual child, sibling groups
CP4.3	Be able to offer expert opinion regarding the child's psychological needs and state of mind to contribute to the development of treatment, educational and care plans
5.	Be able to practise in a non-discriminatory manner
6.	Be aware of the impact of culture, equality and diversity on practice
7.	Be able to maintain confidentiality
8.	Be able to communicate effectively
CP8.1	Be able to select, move between, understand and use age appropriate forms of verbal and non-verbal communication with clients including communication through play

CP8.2	Be able to understand and work with imaginal approaches and creative media to facilitate deep psychological communications; be able to do this with special attention to socio-cultural differences and / or the developmental maturity of the client
CP 8.3	Be able to recognise one's place within, develop and maintain multi disciplinary/agency networks to support treatment plans/psychotherapy
CP8.4	Be able to demonstrate extensive knowledge and skill in understanding and responding to the limited modes of communication that may be available to children and vulnerable young people; demonstrate an ability to adapt and create client specific approaches to such work
9.	Be able to work appropriately with others
CP 9.1	Be able to understand and work with the dynamics within multi disciplinary teams, across disciplines and between agencies
CP 9.2	Be able to work with colleagues, or key partners, to support the design, implementation, conduct, evaluation, interpretation and dissemination of research activities
CP 9.3	Be able to provide consultation to individuals and groups of staff and professionals working with infants, children and young people
10.	Be able to maintain records appropriately
11.	Be able to reflect on and review practice
CP11.1	Be able to assess and review the appropriateness and effectiveness of the therapeutic work in collaboration with the client, and where relevant with parents and other stakeholders
CP11.2	Be able to undertake assessment and review of the therapeutic work taking into account contemporary and emerging researched methods of evaluation.
12.	Be able to assure the quality of their practice
13.	Be able to draw on appropriate knowledge and skills to inform practice
CP13.1	Be able to draw on knowledge of a range of theories and evidence concerning psychological development, psychological

	disorder and severe mental, emotional or psychosocial distress with particular reference to their applications to children and young people
CP13.2	Be able to draw on knowledge of factors common to all major psychotherapeutic and psychological approaches to working psychotherapeutically with children and / or young people
14.	Understand the key concepts of the bodies of knowledge, which are relevant to their profession
CP14.1	Be able to draw on a coherent and systematic body or bodies of child psychological and child psychosocial theory that continues to be developed, codified and /or elaborated and that underpins their theoretical model(s) and approach
CP14.2	<p>Be able to draw on and evaluate theories and research in the following areas with particular reference to working with children, young people and / or families:</p> <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 in therapeutic work with young people, children and families • Institutional and group dynamics
CP14.3	Be able to understand and work with the presentation, development and maintenance of a wide range of mental, developmental and emotional health problems and their impact on social and individual functioning that are generally presented by and / or tend to affect children and / or young people in particular
15.	Be able to establish and maintain a safe practice environment
CP15.1	Be able to make appropriate decisions and where necessary take action regarding the safety of the child and the therapist within the therapeutic setting

