

Annual review of accreditation 2020/21

Association of Christian Counsellors (ACC)

June 2020

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About Association of Christian Counsellors

The Association of Christian Counsellors (ACC) registers:

- Counsellors
- Psychotherapists

Its work includes:

- Setting and maintaining standards of practice and conduct
- Maintaining a register of qualified professionals
- Assuring the quality of education and training
- Requiring registrants to keep their skills up to date through continuing professional development
- Handling complaints and concerns raised against registrants and issuing sanctions where appropriate.

As of March 2020, there were 874 registrants on ACC's register. ACC was first accredited on 26 March 2015. This is its fifth annual review and this report covers 26 May 2019 to 26 May 2020.

Background

The Professional Standards Authority accredits registers of people working in a variety of health and social care occupations not regulated by law. To be accredited, organisations holding such registers must prove that they meet our demanding [Standards for Accredited Registers](#) (the Standards). Accreditation is reviewed every 12 months.

Accreditation can be renewed by a Moderator in cases where all Standards are evidenced to be met. A Moderator can issue Recommendations and note Achievements.

Where concerns do exist, or information is not clear, a targeted review will be initiated by a Moderator. The outcome of this review is assessed by an Accreditation Panel, who can decide to renew accreditation, renew accreditation with conditions, suspend accreditation or remove accreditation. Panels may also issue Recommendations and note Achievements.

- **Condition** – Changes that must be made within a specified timeframe to maintain accreditation
- **Recommendation** – Actions that would improve practice and benefit the operation of the register, but do not need to be completed for compliance with the Standards to be maintained. Implementation of recommendations will be reviewed at annual renewal
- **Achievement** – Areas where a register has demonstrated a positive impact on one of the four pillars of the programme; protection, choice, confidence and quality.

Outcome

Accreditation for the ACC was renewed for the period of 26 May 2020 to 26 May 2021.

Accreditation was renewed by a Moderator following a review of evidence gathered by the Accreditation team and supplied by ACC.

The following Recommendations were issued to be implemented by submission of annual renewal documentation:

1. ACC should re-consider the register to ensure that the individual risks identified by the Authority and any others which are likely to cause specific dangers to the public are explicitly set out in the register. (Paragraphs 3.1 to 3.3)
2. ACC should consider making it clear that the conflicts of interest policy, or something similar, applied also to the RAP. (Paragraphs 5.1 to 5.4)
3. ACC should revise its written process setting out its approach when handling non-compliance with its CPD requirements to include the process by which a registrant may have their membership withdrawn. (Paragraphs 10.1 to 10.5)

The following Achievement was noted:

1. The Authority was impressed by the swiftness with which the ACC developed its COVID-19 Crisis Counselling Support Service for NHS frontline staff, staff working in care homes and people who have been bereaved during the COVID-19 epidemic. (Paragraphs 2.1 to 2.3)

The following report provides detail supporting the outcome.

Assessment against the Standards for Accredited Registers

Standard 1: the organisation holds a voluntary register of people in health and/or social care occupations

- 1.1 There were no significant changes reported or noted in the past year. ACC reported an increase in the number of registrants over the past year.
- 1.2 The Authority found that this Standard continues to be met.

Standard 2: the organisation demonstrates that it is committed to protecting the public and promoting public confidence in the occupation it registers

- 2.1 There were no significant changes reported or noted in the past year.
- 2.2 ACC has set up a COVID-19 Crisis Counselling Support Service for NHS frontline staff, staff working in care homes and people who have been bereaved during the COVID-19 epidemic. Information about the service is provided on ACC's [website](#). The service offers up to 10 counselling sessions on a no fee basis provided by volunteers either on-line or by telephone. The information provided notes that counsellors come from all the professional bodies including BACP, UKCP and the NCS and may have different faith backgrounds. ACC reported that it at the time of submitting its annual review, it had over 250 volunteers, the majority registered with ACC. ACC note that students who are in their final year and who have over 50 hours of practice and a professional service may be used as a reserve. In the information leaflet provided, ACC have signposted to other services for those who are not eligible for this one.
- 2.3 The Authority was impressed by the swiftness with which the ACC developed the service and regarded this as an Achievement that should be noted.
- 2.4 The Authority found that this Standard continues to be met.

Standard 3: risk management

- 3.1 ACC has re-written its risk matrix over the past year. The Authority compared the new matrix to that received last year and noted that ACC has made some significant changes including removing and amalgamating some of the risks.
- 3.2 The Authority noted that two of the removed risks included working with children and recovered memories. Previously, the Authority has requested that registers include specific risks associated with working with children and vulnerable people in their risk registers. The Authority has also previously requested that counselling registers include risks associated with recovered memories in their risk matrices. The Authority noted that from previous reviews, ACC has an awareness of these risks and that the mitigations previously identified are covered within the current risk matrix.
- 3.3 The Authority was concerned that these matters were not specifically referred to in the ACC's Risk Register and that, if they are not there, they are less likely to be explicitly considered by the ACC when addressing risks and how

to mitigate them. There is a danger that, in expressing risks at a very high level, the ACC risks missing serious individual concerns. The Authority decided to issue a Recommendation: ACC should re-consider the register to ensure that the individual risks identified by the Authority and any others which are likely to cause specific dangers to the public are explicitly set out in the register. (Recommendation 1)

- 3.4 The Authority has asked that all Accredited Registers review and update their risk registers, to assess how the coronavirus emergency will impact them and their registrants, and what actions can be taken to mitigate these risks. ACC reported that its office staff are working from home. ACC has provided advice, guidance and resources to its registrants such as adapting to working on-line or by telephone. ACC has established a pool of volunteer accredited counsellors and supervisors to act as 'standby supervisors' for any registrants that find themselves without a supervisor for a long period of time. As noted above ACC has also set up a COVID-19 Counselling Support Service.
- 3.5 ACC has added the epidemic as a separate risk to its risk matrix. ACC has provided guidance for its registrants which is published on its [website](#). ACC has also produced an operational risk document specifically for Covid-19 which is discussed by the Board at its monthly meetings.
- 3.6 The Authority considered that the redesigned risk register might not be well-suited to identifying and managing individual risks. However, it is clear that the ACC has been considering risks and therefore considered that this Standard continues to be met.

Standard 4: the organisation demonstrates that it has sufficient finance to enable it to fulfil its voluntary register functions effectively including setting standards, education, registration, complaints and removal from the register

- 4.1 There were no significant changes reported or noted in the past year. As part of its due diligence, the Authority reviewed records from Companies House and the Charity Commission and noted the Standard continues to be met.

Standard 5: the organisation demonstrates that it has the capacity to inspire confidence in its ability to manage the register effectively

- 5.1 There were no significant changes reported or noted in the past year.
- 5.2 At last year's annual review, the Authority reported that ACC was carrying out work on its conflict of interest policy, a policy for managing situations where trustees disagree with board decisions and an improved recruitment process for trustees (this is discussed under Standard 7). ACC reported that its updated *Conflict of interest policy and procedure* was approved by the Board in January 2020. It has also developed a *Board decision making policy* which was also approved in January 2020.
- 5.3 The Authority reviewed the documents and noted that the *Conflict of interest policy and procedure* was written for the Board and Executive Directors and explains what a conflict of interest is and how to manage them. The Authority noted that this document did not appear to apply to members of the Register Advisory Panel (RAP) and that the minutes for the RAP did not appear to consider conflicts of interest. ACC confirmed that it does not have a separate

conflicts of interest policy for the RAP but that they are considered at the RAP meetings, however they are not recorded. ACC reported that it will update the RAP meeting agenda to include conflicts of interest as a standing item and that these will be recorded in future minutes. ACC noted that it is happy to devise a conflicts of interest policy for the RAP and that this would be included within its standing documents.

- 5.4 The Authority considered that the document was clear and dealt with the major issues. In his view it was important that this should apply to the RAP and decided to issue a Recommendation: ACC should consider making it clear that the conflicts of interest policy, or something similar, applied also to the RAP. (Recommendation 2)
- 5.5 The Authority found that this Standard continues to be met.

Standard 6: the organisation demonstrates that there is a defined knowledge base underpinning the health and social care occupations covered by its register or, alternatively, how it is actively developing one. The organisation makes the defined knowledge base or its development explicit to the public

- 6.1 There were no significant changes reported or noted in the past year. ACC continues to publish articles in *Accord* and in *Accord extra*. Those published in *Accord extra* are available on ACC's [website](#). ACC also has a page on its [website](#) about the knowledge base and reported that it is still planning to develop a bespoke piece for the website to expand the knowledge base that is currently published.
- 6.2 The Authority found that this Standard continues to be met.

Standard 7: governance

- 7.1 There were no significant changes reported or noted in the past year.
- 7.2 ACC reported on the changes to its governance over the past accreditation year. It has recruited three new Board members in 2019. ACC's Board oversees the organisation and the Executive is responsible for the day to day work of the organisation. Previously, ACC had an Executive Chair and three Directors. In 2019, ACC created a Chief Executive Officer role, however, the recruitment for this post has been put on hold due to the COVID-19 crisis. Two of the three Director roles were removed (the Director of Operations and Communications and the Director of Pastoral Care). The Director of Counselling role remains in place and a new Director role for Pastoral Care and Coaching and Mentoring will be created. Until the new roles are recruited into, the Chair and Vice Chair are offering executive support to ACC.
- 7.3 As noted under Standard 5, ACC has updated some of its governance documents. It has also updated its *Board recruitment and induction policy*. This was approved in June 2019 and used in the recruitment of three Board members appointed in 2019.
- 7.4 The RAP is responsible for overseeing the register. There have been no changes to the membership of this group in the past year, details of the RAP and its Terms of Reference are published on ACC's [website](#). The Chair of the

RAP provided a report to the Authority of the work of the RAP over the past year.

- 7.5 The Authority reviewed the governance documents for the RAP. The Authority noted that three out of the four RAP members are due to stand down at the same time and that ACC has not recorded its recruitment and induction processes for the RAP. ACC confirmed that 'the current RAP members have expressed their desire to serve another term. We realise however that we need engage in 'succession planning' and recruit new additional members of the RAP in the interim to avoid the risk/impact on continuity.' ACC noted that it is carrying out a review of the RAP's standing documents and that 'the review has highlighted the need for succession planning and a recruitment and selection process.' ACC will be updating these documents.
- 7.6 The Authority considered the revised process documents and welcomed the more robust approach that was being taken. The Authority considered that, in future reviews of this process, the ACC might wish to consider developing criteria around the particular skills that they would like to see represented on its Board and the RAP, as well as considering succession planning and ensuring that there is not a significant loss of experience if terms of appointment end at the same time. The Authority requested that the ACC provide the updated versions of the RAP's standing documents when they are ready to the Accreditation team for review.
- 7.7 The Authority noted the confirmation from ACC that the absence of a Chief Executive and of two Directors has not had an adverse impact on the ACC's ability to protect the public. On this basis and recognising that the changes to appointment and induction processes represented an improvement on a model that had previously been found acceptable, the Authority was satisfied that this Standard continues to be met.

Standard 8: setting standards for registrants

- 8.1 There were no significant changes reported or noted in the past year.
- 8.2 At last year's annual review, the Authority noted that it was good practice to have guidance for registrants covering whistleblowing and Duty of Candour and so issued the ACC with the following Recommendation: the ACC should consider developing guidelines for its registrants about whistleblowing and duty of candour.
- 8.3 ACC provided a copy of its guidance on the professional Duty of Candour. The guidance explains the Duty of Candour and links it to ACC's Code of Ethics. The guidance explains how Duty of Candour relates to counselling practice.
- 8.4 ACC provided its new organisational whistleblowing policy to the Authority. This policy is for ACC's staff and volunteers. It explains how to raise a concern and ACC's responsibilities. ACC noted that its assessment of whistleblowing suggests that it would not apply to most of its registrants as the majority work in private practice. ACC has not therefore developed separate guidance for its registrants, but has provided a link to the Government's guidance on its useful links page.

- 8.5 The Authority noted that this action is similar to other registers where the majority of their registrants are working in private practice and has previously been accepted by the Authority. The Authority noted that the document included guidance on what to do if there were concerns about another individual. The Authority also considered that the document on candour generally was full and provided some clear guidance and so was satisfied that the Recommendation had been considered.
- 8.6 A member of the RAP has produced a draft core competency framework which considers faith in counselling. This draft is going to be reviewed by a group of stakeholders, including ACC members, trainers and academics. Once finalised, ACC states that it will adopt the framework.
- 8.7 The Authority asked that ACC should keep the Accreditation team informed of progress with this project.
- 8.8 The Authority found that this Standard continues to be met.

Standard 9: education and training

- 9.1 There were no significant changes reported or noted in the past year.
- 9.2 The Authority was satisfied that the existing processes which had been approved by the Authority remained sufficient and that this Standard continues to be met.

Standard 10: management of the register

- 10.1 There were no significant changes reported or noted in the past year.
- 10.2 At last year's annual review, the Authority reviewed ACC's Continual Professional Development (CPD) policy. The team noted that it was not clear what the consequences of non-compliance with the policy was and decided to issue the following Recommendation: the ACC should consider adding the consequences of non-compliance with CPD into its CPD policy.
- 10.3 ACC added a statement to its CPD guidance to make the consequences of non-compliance with CPD clear.
- 10.4 ACC check compliance with its CPD requirements through an annual audit of 10% of its registrants. The audit checks cover CPD, insurance and supervision. ACC has updated its audit process guide which provides guidance for the assessors. This guide also makes it clear that membership of the ACC is contingent on a satisfactory audit outcome.
- 10.5 The Authority noted that the ACC had clarified the possible consequences of failing to complete the CPS requirement. The Authority agreed that it was reasonable for the ACC to attempt to assist registrants who for good reason had failed to meet the requirement. However, considered that it would be appropriate for the ACC to have a written process for its approach which makes it clear at what points the registration will be terminated. This would ensure that the register was able to deal consistently and fairly while retaining an element of flexibility. It would also assist registrants to be aware of the likely process. The Authority decided to issue a Recommendation: ACC should revise its written process setting out its approach when handling non-

compliance with its CPD requirements to include the process by which a registrant may have their membership withdrawn. (Recommendation 3)

- 10.6 ACC reported that it has changed what it requires for annual renewals to be processed. Previously a registrant's renewal could not be uploaded until the registrant had submitted an insurance certificate and a CPD log. ACC reviewed this requirement and noted that a lot of time was taken up in chasing registrants who had not completed this. ACC noted that it had only needed to follow up with 10 registrants over the previous two years with queries about their insurance or CPD. ACC decided to remove this requirement from its annual review process. ACC still requires its registrants to provide insurance details such as the name of the insurer, policy number and expiry date and registrants are required to declare that they are completing relevant CPD.
- 10.7 ACC reported that it has developed a transfer route for supervisors accredited with the British Association for Counselling and Psychotherapy (BACP) which holds one of the senior accredited grades for supervision. Successful applicants will transfer to the ACC Accredited Supervisor grade. ACC's Board have also approved the proposal to extend this to the National Counselling Society (NCS).
- 10.8 The Authority noted that the ACC has a clear CPD requirement and that it monitors compliance with this through audits and has made the consequences of non-compliance clearer. The Authority therefore found that this Standard continues to be met.

Standard 11: complaints and concerns handling

- 11.1 There were no significant changes reported or noted in the past year.
- 11.2 At last year's annual review, the Authority reviewed ACC's complaints procedure and noted that it was not clear what actions the ACC could take to informally resolve a complaint. The Authority considers that it is good practice to resolve complaints through early resolution where appropriate, and that this should be clearly documented within the policy. The Authority decided to issue the following Recommendation: the ACC should clearly document its procedure for early resolution of complaints within its policies and procedures.
- 11.3 ACC provided its draft complaints procedures to the Authority. The ACC has added a section into its complaints procedure which encourages where appropriate the use of mediation to resolve complaints.
- 11.4 The Authority noted that the option of mediation appeared to be included in the draft process and was satisfied that the ACC had appropriately considered the Recommendation.
- 11.5 The draft versions provided to the team were reviewed by the Board and the RAP. The team provided some feedback on the draft versions which ACC plan to address before sending out to its membership for consultation. ACC is also testing the draft procedures with current complaints.
- 11.6 The Authority noted that the draft new process is still being finalised. The Authority noted that there did not appear to be any lay involvement in the process and that this, along with the other comments made by the Accreditation team should be considered. The Authority asked that the ACC

provide the Accreditation team with finalised versions of its complaints procedures and any guidance documents developed so that the team can review and decide whether a notification of change is needed.

- 11.7 Also, at last year's annual review, ACC indicated that it was planning to review its organisational complaints policies. ACC reported that no progress has been made on this as it wanted to complete the changes to its procedures for complaints about registrants before reviewing its organisational complaints process.
- 11.8 The Authority noted that there had been very few complaints this year and that the ACC was revising and improving its procedure. The Authority found that this Standard continues to be met.

Share your experience

- 12.1 The Authority did not receive any responses to the invitation to share experience and did not receive any concerns about ACC during the accreditation year.

Impact assessment

- 13.1 There were no significant changes reported or noted in the past year.
- 13.2 The Authority considered the impact of its decision to reaccredit ACC.

Equality duty under the Equality Act 2010

- 14.1 The Authority had regard to its duty under the Equality Act 2010 when considering its decision to reaccredit.