

Annual review of accreditation 2018/19

The Association of Child Psychotherapists (ACP)

June 2018

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About the Association of Child Psychotherapists:

The ACP registers:

- Psychoanalytic Child and Adolescent Psychotherapists in the United Kingdom

Its work includes:

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

As of April 2018, there were 639 registrants on the ACP's register.

The ACP was first accredited on 20 November 2014. Following its most recent annual review of accreditation, the ACP requested to change its annual accreditation date from 20 November to 20 June. This was agreed by the Authority in line with previous decisions and a pro rata amount of the annual review fee was refunded to the ACP. This fourth annual review and report therefore covers a reduced period from 20 November 2017 to 20 June 2018.

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 twelve 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 Association of Child Psychotherapists (ACP) was renewed by a Moderator, following a review of evidence gathered by the Accreditation team and supplied by the ACP, for the period of 20 June 2018 to 20 June 2019.

No Conditions were issued.

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

1. The ACP should review its risk matrix to ensure that its scores are accurate and reflect the effectiveness of mitigations in place. (See paragraph 3.4)
2. The ACP should review the duration of sanctions it may issue and the length of time before applications to restore registration may be made. (See paragraphs 11.7-11.8)
3. The ACP should consider providing reasons for all final decisions made regarding fitness to practise, including to readmit practitioners to its register. (See paragraphs 11.9-11.10)
4. The ACP should consider whether decisions to set aside complaints outcomes should be made by an independent panel. (See paragraphs 11.11-11.13).

The following Achievement was noted:

1. The formation of the ACP's Diversity Working Group to take action to increase access to the profession from currently under-represented groups, including men and people from BAME communities. (See paragraph 2.4).

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.
- 1.2 The ACP has seen an increase in the number of registrants on its register in the past year, from 631 to 639.
- 1.3 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 The ACP reported ongoing challenges regarding funding for core NHS training, and employment of child and adolescent psychoanalytic psychotherapists in public services. The ACP advised it works with training schools to engage with Health Education England and Clinical Commissioning Groups to secure funding for ongoing training.
- 2.3 The ACP highlighted 'Treat Them Right', its campaign for all child and adolescent mental health services to have access to an ACP registered child psychotherapist. The ACP has encouraged registrants to contact their MP and provides template letters explaining the value of and need for ACP registered child psychotherapists.
- 2.4 The ACP has authorised a Diversity Working Group, which sits under its Operations & Liaison Committee within the ACP's organisational structure, to take action to increase access to the profession from currently under-represented groups, including men and people from Black, Asian and Minority Ethnic (BAME) communities. The Moderator noted the ACP's Diversity Working Group as an Achievement. (Achievement 1)
- 2.5 The Authority found that this Standard continues to be met.

Standard 3: risk management

- 3.1 The ACP has considered risks to both practitioners and its register related to the new General Data Protection Regulation (GDPR). The ACP noted that the regulation's complexity could lead to significant fines for registrants who breached it, affecting their ability to practise. The ACP's risk matrix presented this as a moderate, increasing risk as the effectiveness of mitigating actions it has taken are as yet unclear.
- 3.2 The ACP has contacted registrants to advise of the need to comply with requirements, and directed them to resources such as the Information Commissioner's Office. The ACP has not provided specific guidance due to potential liability for providing incorrect advice. The ACP notes that the NHS holds responsibility for registrants working under that body.

- 3.3 The ACP has added a mitigating action for a risk of registrants working outside their competence. The ACP makes it clear that its registrants are qualified to work with clients up to the age of 25 years only. Practitioners working with older clients should be appropriately trained and registered with another body. This relates to actions described under Standard 8.
- 3.4 The Moderator noted that the residual risk rating for many risks on the ACP's risk matrix was either the same or higher than the rating for the inherent risk, despite the mitigating actions, suggesting that those actions were either ineffective or making the situation worse. The Moderator issued a Recommendation for the ACP to review its risk matrix to ensure that its scores are accurate and reflect the effectiveness of mitigations in place (Recommendation 1).
- 3.5 The Authority found that this Standard continues to be met, with one Recommendation.

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
- 4.2 As part of its due diligence, the Accreditation team reviewed records from Companies House. At the previous annual review, the team checked ACP's Abbreviated accounts for the period 25 August 2015 to 31 December 2016, filed with Companies House 8 June 2017.
- 4.3 The ACP provided draft accounts. The team noted that ACP appears to continue to be financially sustainable.
- 4.4 The ACP advised it had raised its registration fee to cover the increased fees set by the Authority.
- 4.5 The Authority found that this 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 The ACP has worked to ensure it is GDPR compliant by reviewing and updating its policies. The ACP has directed registrants to relevant guidance as discussed above.
- 5.3 The ACP highlighted in its submission to the consultation paper on the Department of Health and Social Care's *Promoting Professionalism, Reforming Regulation* that it is a core NHS profession which sets the quality assurance framework for the training of specialist psychoanalytic child and adolescent psychotherapists. The ACP emphasised that if a new model of regulation is enacted, professional bodies would be important in maintaining relevant knowledge and of occupation-specific risks.
- 5.4 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 The ACP has worked to develop its knowledge base through the appointment of its Director of Scientific Development, supported by its Scientific Development Committee, to support and develop ‘research and publications, promotion of scientific events including events open to the public and development of new Supported Clinical Networks.’
- 6.2 The Authority found that this Standard continues to be met.

Standard 7: governance

- 7.1 The ACP has become a company limited by guarantee, with a Board composed of executive and non-executive directors, and new committee structure.
- 7.2 Scrutiny of the ACP, to ensure it adequately protects the public, had previously been carried out by its external Independent Scrutiny and Advisory Committee (ISAAC). At the previous annual review, ACP outlined how this scrutiny would now be performed by its non-executive directors, including lay members, and that ISAAC had assured itself that the Board could fulfil those functions.
- 7.3 The ACP advised that its Board is ‘now in a position to take over the scrutiny functions previously provided by ISAAC, and the non-executive directors (both lay and member) will be increased to strengthen this role and ensure a proper separation between executive and non-executive roles’. ACP advised it aimed to recruit further non-executive directors to its Board, to allow for the increased scrutiny function.
- 7.4 The team asked the ACP for an update following the May 2018 handover of scrutiny functions from ISAAC. The ACP advised this took place on 24 May and that the main aspects of ISAAC’s ‘role and functions were discussed in the context of these being taken over by the ACP Board, with a particular role in this for ACP’s (lay) non-executive Directors.’
- 7.5 The ACP stated it has appointed its new Chief Executive on an interim basis for two years, and ACP’s newly appointed Chair took office on 1 April 2018. The ACP informed the team of other changes to the organisation including the appointment of its Director of Scientific Development, discussed above. The previous Chair has taken on the role of interim Registrar and Director of Professional Standards to provide continuity through the governance changes.
- 7.6 A representative of the Authority spoke to the ACP’s Ethical Practice Group (EPG) and Board in January 2018 on topics including promoting professionalism and preventing harm to patients, and resolving complaints.
- 7.7 The Moderator noted that the ACP’s Board of Directors does not have power to affect complaints decisions, which are the responsibility of the Professional Standards Committee.

- 7.8 The Moderator noted the ACP's recruitment of an interim Chief Executive as a positive action as part of the organisation's development.
- 7.9 The Authority found 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 The previous Accreditation Panel noted that different registers within counselling and psychotherapy may have different scopes of practise, which could raise questions about the psychotherapeutic approach applied by a dual-registered therapist, and which register is responsible for governing this. That Panel issued a Learning Point for the ACP to consider how it can ensure that the public knows that clients over the age of 25 should be seen by suitably qualified practitioners on an appropriate register.
- 8.3 ACP has made explicit within its Code of Professional Conduct and Ethics that it 'accredits its members on the public register to work with infants, children, adolescents (up to the age of 25) and parents (where the child is the identified patient)'. The ACP highlighted that it worked with registrants to 'ensure that any affected patients had an appropriate ending or transfer of treatment' as they approached or passed that age. The ACP has clarified this following a complaint made to it regarding treatment of a client over the age of 25 by a practitioner registered with ACP and other Accredited Registers. The changes would allow ACP to direct complainants, in the first instance, to registers whose practitioners work with older clients.
- 8.4 The ACP has amended its register website to state that registrants are qualified to work with children from 0-25 and that members should be registered separately for work outside this training:
- 'The ACP is committed to ensuring patients receive the highest standard of care and are treated by appropriately trained and regulated practitioners. Our members are trained to work with children and young people from birth to age twenty-five. If you fall outside this age range we recommend you seek a suitably qualified and registered practitioner. If you click here you will be able to search Accredited Registers where you may find a suitably qualified adult psychodynamic or psychoanalytic psychotherapist.'
- 8.5 The team noted that ACP's [Code of Professional Conduct and Ethics](#) (September 2017) makes clear its accredits registrants to work with clients up to the age of 25 only:
- 'A Member should practise only within the limits of his/her professional abilities and not offer or undertake any form of treatment in which s/he lacks competence. The ACP accredits it[s] members on the public register to work with infants, children, adolescents (up to the age of 25) and parents (where the child is the identified patient).'
- 8.6 The Moderator agreed that the Learning Point had been considered and addressed.
- 8.7 The Authority found that this Standard continues to be met.

Standard 9: education and training

- 9.1 ACP launched its Training Council Complaints Process, setting out how 'a complaint can be made by a Stakeholder to the Training Council of the Association of Child Psychotherapists (ACP) about a Training School'. Stakeholders include trainees, staff, supervisors and service users. The ACP's Training Council develops, monitors, and maintains standards for accredited Training Schools that lead to ACP registration. The complaints process allows the ACP to address concerns and ensure its standards are met by the schools.
- 9.2 The Authority found 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 The team noted that the ACP published detailed Continuing Professional Development (CPD) guidance for registrants in September 2017.
- 10.3 The ACP carries out an annual audit of registrants' CPD returns. The team noted that reports cover September through August of the following year; the ACP's 2016-2017 report was not yet available at time of assessment.
- 10.4 The ACP advised it has a series of events planned throughout 2018 that will support registrants in meeting their CPD requirements, for example court reporting to psychotherapists and level three safeguarding training for counsellors and therapists.
- 10.5 The ACP register lists the following categories of registrants: Trainee Members, Full Members, Retired Members/Not Working, Honoured Members, and Overseas Members. The ACP advised it was considering changes to its online register, to distinguish between those registered to practice and those who were not practising within the UK but still engaged with the ACP's work. The change would mean Full Members would be referred to as Practising Members to make it clear to the public who is registered to practice. ACP also aims to separate its Retired/Not Working category into two separate ones to clarify whether registrants had ended their practice completely or might return to it, for example following maternity leave. This was due to be ratified by ACP's board in May 2018.
- 10.6 The ACP confirmed these changes were agreed at its May Board meeting. It advised that 'only Full members will be included in the online register as Practising Members. ACP would create a separate membership roster for: Trainee members, Retired members, Other non-practising members, Honoured members and Overseas members.
- 10.7 Following discussion with the Accreditation team, the ACP added a statement to the register pages of the website stating that PSA accreditation and use of the quality mark only applies to registrants practising within the UK.
- 10.8 The Authority found that this Standard continues to be met.

Standard 11: complaints and concerns handling

- 11.1 The ACP updated its Disciplinary Procedures during the accreditation year and published these in March 2018. The team checked the ACP's updated Disciplinary Procedures and the ACP provided answers to questions raised by the team.
- 11.2 At the previous annual review, the ACP's Ethical Practice Group's (EPG) approach to handling complaints was noted to be aimed to make complainants feel heard, even if the complaint was not progressed through the full process.
- 11.3 The ACP confirmed that support offered to registrants undergoing complaints procedures from appointed senior registrants would be assured to have no conflicts of interest. Supporters provide emotional support without having formal roles within the complaints process.
- 11.4 No time limit was given in the Disciplinary Procedures for the use of interim suspensions. The ACP advised it would use a 12-month maximum, with the aim to complete complaints processes within six months where possible.
- 11.5 ACP will post notes of expulsion from the register for 10 years. This is longer than some registers, and exceeds the recommendations from the Authority's report *Health professional regulators' registers: Maximising their contribution to public protection and patient safety* which suggests a minimum of 5 years.
- 11.6 Sections 9.2-9.3 of the Disciplinary Procedures allow a registrant to make written representations following a Disciplinary Panel's finding of a breach of the ACP's Codes, when they have not previously admitted the breach. This reflects practice among other regulators, for example the General Dental Council and is not inappropriate. The Moderator noted that this was a standard process, however stated that ACP may wish to consider whether these paragraphs could be clearer for the public.
- 11.7 Expelled-registrants are able to reapply for registration after two years, while suspensions may be for up to three years. Applications for restoration to the register are considered by the ACP's Ethical Practice Group. The ACP highlighted the most severe cases would be dealt with by expulsion and that some expulsions, for example for criminal offences against children, would not be likely to lead to restoration to the register.
- 11.8 The Moderator noted that many professions set a minimum time of five years before a restoration to the register application may be made, but different registers could take different approaches. The Moderator was concerned, however, that it was illogical for a registrant potentially to be suspended for a longer period than someone who had been expelled. The Moderator issued a Recommendation for the ACP to review the length of its sanctions and the length of time before applications to restore registration may be made (Recommendation 2).
- 11.9 The Ethical Practice Group will provide reasons why applications for restoration have been refused, but not for why applications have been accepted. The ACP advised that such decisions are not in the public domain and that reasons to restore to the register would be in line with the application made by the registrant.

- 11.10 The Moderator noted that in terms of transparency the ACP should record and provide reasons for all final decisions, including those to readmit practitioners to its register. The Moderator issued a Recommendation for the ACP to consider providing reasons for all such decisions (Recommendation 3).
- 11.11 A registrant has a right to appeal an outcome within the Disciplinary Procedure, and a complainant has the right to request the decision to be set aside by the Registrar/Director of Professional Standards.
- 11.12 The Registrar/Director of Professional Standards, with legal advice, may set aside decisions in response to concerns from a complainant, a person who supplied information dealt with as a deemed complaint, or the involved registrant where there have been particular errors by the panel. The power to set aside allows the Registrar/Director of Professional Standards to require the decision to be made again, either by the original decision maker or substitute. However, the Registrar/Director of Professional Standards also has the power to decide that no further action should be taken.
- 11.13 The Moderator considered that it is not transparent or desirable for decisions made by a panel to be overturned by an officer or employer of a register and that it would be more appropriate for such decisions to be made by an independent panel. He considered this was a serious matter that may affect compliance with Standard 11 if not appropriately addressed, and may require a Condition at a future annual review. He noticed however, that there had been no cases to date where this power had been exercised. The Moderator issued a Recommendation for the ACP to consider whether decisions to set aside complaints outcomes should be made by an independent panel (Recommendation 4). The Moderator considered the ACP should provide reasoning for the outcome of its consideration at the following annual review.
- 11.14 The ACP is developing a Practice Review policy as a form of alternate dispute resolution for handling cases that may not require formal investigation and hearings.
- 11.15 The ACP received no complaints against a registrant, or itself, since the previous annual review. It received one complaint against a training organisation, currently under investigation.
- 11.16 The Moderator noted that this Standard continues to be met, with three Recommendations.

Share your experience

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

Impact assessment

- 13.1 There were no significant changes reported or noted in the past year.
- 13.2 The Authority took account of the impact of its decision.

Equality duty under the Equality Act 2010

- 14.1 The Moderator noted the formation of the ACP's Diversity Working Group as an Achievement (See paragraph 2.4).
- 14.2 The Authority had regard to its duty under the Equality Act 2010 when considering the application for renewal of accreditation.