

# Preliminary Standard One assessment

Athena Herd (AH)

February 2022

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## About Athena Herd

The Athena Herd registers:

- Equine Facilitated Practitioners
- Equine Assisted Practitioners
- Equine Practitioners
- Equine Interactions
- Equine Facilitated Learning
- Equine Assisted Learning

Its work includes:

- Setting and maintaining standards of practice and conduct
- Developing a register of qualified professionals
- Delivering education and training
- Handling complaints and concerns raised against registrants and issuing sanctions.

Athena Herd's Register is in development and not yet live. It expects approximately 30 of its members to be eligible once launched later in 2022.

# 1. Background

## How we assess organisations against Standard One ('public interest test')

The Professional Standards Authority accredits registers of people working in a health and social care occupations not regulated by law. To be accredited, organisations holding such registers must prove they meet our Standards for Accredited Registers<sup>1</sup> (the Standards). Once accredited, we check that Registers continue to meet our Standards.

There are eight Standards. Registers must meet Standard One before we can assess against how the register meets the remaining Standards. Standard One checks eligibility under our legislation, and if accreditation is in the public interest.

Organisations may apply for preliminary assessment against Standard One before submitting a full application.

Preliminary Standard One decisions are made by an Accreditation Panel following an assessment of evidence by the Accreditation Team. The evidence includes the organisation's application, a desk-based review of relevant sources of evidence about the benefits and risks of the role(s) registered, and responses received through our 'Share your experience' public consultation.

If the Panel decides that the activities of registrants fall within the definition of healthcare, and that overall, the benefits of the services of practitioners outweigh the risks then it may determine that Standard One is provisionally met. If the Panel decides that either of these requirements is not met, then this will be communicated to the organisation with the reasons for the decision, and it may apply again later.

Decisions for preliminary assessments against Standard One are provisional. If an organisation later submits a full application, we will check whether there have been any changes which effect this outcome. More about how we assess against Standard One can be found in our *Supplementary Guidance for Standard One*<sup>2</sup>.

## About the organisation – Athena Herd

Athena Herd Foundation CIC (AH)<sup>3</sup> is registered with Companies House, company number 11914686. It is in the process of applying for Charitable Incorporated Organisation (CIO) status with the Charity Commission. AH is also an organisational member of the British Association for Counselling and Psychotherapy (BACP), which is accredited by the Authority.

The three main areas of AH's work are:

- 'Awarding' – AH has applied to the Office of Qualifications and Examinations Regulation (OFQUAL) to become an awarding

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<sup>1</sup> [https://www.professionalstandards.org.uk/docs/default-source/publications/standards/standards-for-accredited-registers.pdf?sfvrsn=e2577e20\\_6](https://www.professionalstandards.org.uk/docs/default-source/publications/standards/standards-for-accredited-registers.pdf?sfvrsn=e2577e20_6)

<sup>2</sup> [https://www.professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-supplementary-guidance-for-standard-one.pdf?sfvrsn=3e5f4920\\_6](https://www.professionalstandards.org.uk/docs/default-source/accredited-registers/standards-for-accredited-registers/accredited-registers-supplementary-guidance-for-standard-one.pdf?sfvrsn=3e5f4920_6)

<sup>3</sup> Website: [www.athenaherd.org.uk](http://www.athenaherd.org.uk)

organisation of regulated qualifications at Levels 5 and 6. The Accredited Register would sit within this arm.

- ‘Learning’ – AH offers externally accredited training (Level 2 Certificate in Equine Facilitated Learning and Level 4 Equine Facilitated Practitioner Diploma).
- ‘Community’ – AH delivers funded equine facilitated interventions for the benefit of the public. This includes working with vulnerable groups.

AH is a small organisation. It plans for its main Director to become Chief Executive Officer of the CIO. It employs several paid staff, some volunteers and works with several self-employed workers. It contracts some business services to external providers.

The services provided by AH fall under the broad term ‘equine facilitated learning’ (EFL). Athena Herd provides EFL for individuals and groups. This includes those seeking alternative learning and therapeutic interactions; corporate leadership and management; learning organisations such as schools and colleges; and private individuals and groups.

### About equine practitioners

Equine facilitation is the term for roles that involve working with horses to develop self-awareness. It is often combined with other therapeutic approaches, such as counselling, to provide an ‘experiential learning’ process. This approach is premised on an understanding of the horse as an intelligent animal, with which the learner can develop a strong non-verbal relationship. The process of working with horses is intended to complete self-development and self-reflection.

Within this report we use the broad term equine practitioner (EP) to describe the roles included in Athena Herds’ register:

- Equine Facilitated Practitioners
- Equine Assisted Practitioner
- Equine Practitioner
- Equine Interactions
- Equine Facilitated Learning
- Equine Assisted Learning

Many EPs will also be trained in other disciplines, such as counselling and psychotherapy. These practitioners will blend a range of therapeutic approaches when working with service users. Counselling and psychotherapy are accessed by individuals privately, and through other services such as health and education.

When used in a therapeutic context, EFL may be considered as a complementary therapy. The use of broader animal-assisted therapies appears to be becoming increasingly widespread<sup>4</sup>.

There are also EPs who do not have prior learning or experience with counselling or psychotherapy. They may or may not have training in other practices such as life

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<sup>4</sup> [Charry-Sánchez JD, Pradilla I, Talero-Gutiérrez C. Animal-assisted therapy in adults: A systematic review. Complement Ther Clin Pract. 2018 Aug;32:169-180. doi: 10.1016/j.ctcp.2018.06.011. Epub 2018 Jun 28. PMID: 30057046.](#)

coaching, particularly if their work is orientated towards corporate environments. In these settings, EPs offer a specialist form of personal development, with aims that include enhanced business performance.

We could not find data on the total number of EPs within the UK. The Register is not yet live, but Athena Herd expects to register 30 of its members to be eligible initially and that this will subsequently increase.

## 2. Outcome

The Panel met on 22 February 2022 to consider Athena Herd's application for a preliminary assessment against Standard One ('public interest test'). Overall, the Panel determined Standard 1 was provisionally met. However, we would only be able to accredit a Register of practitioners whose primary objective in delivering EFL is for personal health and wellbeing, rather than professional development. We also identified some areas where we recommend mitigations for risks are strengthened before a full application. This section of the report summaries the key considerations in reaching this conclusion for each part of Standard One.

### 1a – Eligibility of the register under our legislation

We considered whether AH falls under the scope of our powers of accreditation as set out in Section 25E of the National Health Service Reform and Health Care Professions Act 2002.

It was agreed that statutory registration is not required to engage in Equine Facilitated Learning (EFL) or work as an Equine Practitioner. These roles can therefore be considered as within the programme's scope to accredit registers of voluntary roles, providing the roles provide a form of health care (or unregulated social care activities, within England).

We noted that AH offers EFL in a range of settings with the aim of enhancing professional development; as well as with individuals and groups in therapeutic contexts. The therapeutic contexts include as part of counselling or psychotherapy, and with groups of vulnerable adults.

We decided that where the primary objective of EFL is to improve health and wellbeing, this falls within the scope of the programme. EFL may be considered as a complementary therapy in these contexts. Where the primary objective is professional development, then even if there are secondary benefits of improved wellbeing, this would fall outside the programme's remit.

To accredit AH, we would therefore need to be assured that all of the roles included on the Accredited Register were primarily delivering EFL for health and wellbeing. There would need to be clear definitions of the individual roles registered, and in which contexts the roles (and individuals registered) work.

EFL may be offered alongside other practices. Some of these, such as counselling and psychotherapy, fall clearly within the definition of healthcare. Others, such as life coaching, have greater relevance to professional contexts. AH may want to consider developing a 'directory' for practices such as these, separate to the Accredited Register.

We also considered whether the involvement of animals in delivering EFL affected eligibility. We agreed in this context, the experience of working with horses is used as a therapeutic tool to enhance health and wellbeing. The involvement of animals should not be a barrier provided that there are arrangements in place to ensure their ethical treatment.

Noting that AH operates internationally, we would only be able to accredit a Register of those working within the UK.

Based on our understanding that most of AH's potential registrants are practising with health and wellbeing as primary objectives, Standard 1a is provisionally met. This is conditional to arrangements being made to separate the Accredited Register from activities not directly related to health and wellbeing such as the delivery of EFL in corporate environments, and adjunctive therapies such as healing.

## 1b – Public interest considerations

Under Standard 1b, we consider whether it is likely to be in the best interests of patients, service users and the public to accredit a register, with consideration of the types of activities practised by its registrants. This involves consideration of the overall balance of the benefits and risks of the activities.

### i. Evidence that the activities carried out by registrants are likely to be beneficial

We reviewed evidence provided by AH for the benefits of EFL and wider animal-assisted therapies, and further sources that we had identified through our desk-based review. There does not appear to be extensive direct evidence for the benefits of EFL, and so we also considered the evidence for the broader field of animal-assisted therapies.

The evidence we reviewed suggests the main benefits of EFL are likely to be:

- Personal development and self-awareness. Confidence and trust are developed through 'experiential learning' with horses, drawing on other techniques such as counselling. This can have a positive general effect on health and well-being.
- Enhanced general physical and mental health derived from working outdoors and in nature with the horses, which can be beneficial for stress management.
- Strengthened communication and social skills, including for vulnerable children, young people and adults.

There are also studies which indicate EFL may be helpful with some specific conditions. Several articles and studies referred to the role of the hormone oxytocin (see Beetz et al, 2012<sup>5</sup> for a summary of relevant studies). Release of oxytocin has been associated with animal-assisted therapies in general, triggered in response to sensory stimulation, as it may also be by human touch. A range of studies<sup>6</sup> have linked oxytocin release to specific benefits such as reduced blood pressure, and on stress response.

<sup>5</sup> <https://www.frontiersin.org/articles/10.3389/fpsyg.2012.00234/full>

<sup>6</sup> Smith, Adam S., and Zuoxin Wang. "Hypothalamic oxytocin mediates social buffering of the stress response." *Biological psychiatry* 76.4 (2014): 281-288

The role of oxytocin, as with other factors that are likely to play a role in the benefits of EFL such as being outdoors, are not limited to EFL or animal-assisted therapies. However, they help explain why people may find them helpful, and how they may complement other forms of therapy.

These benefits may be particularly helpful when EFL is used for working with young people to develop core social skills and with vulnerable children, young people and adults. Pelyva et al (2020)<sup>7</sup> found that ‘students of equine-related vocations are more helpful and empathetic, and have fewer behavior problems, than those studying other vocations’; stating that this confirmed ‘the hypothesis that equine-assisted activities correlate with positive behavioural traits among healthy adolescents.’

Frederick et al (2015)<sup>8</sup> provide an overview of research into the benefits of equine-assisted learning with hope and depression in young people. One study cited, Trotter et al. (2009) compared the efficacy of equine-assisted interventions (EAI) for a group of at-risk (defined by social and education factors such as poor educational achievement and school attendance) young people with classroom-based counselling, finding that those who received EIA showed greater improvement. This and other studies also suggest that equine-facilitated approaches may be more effective for some people than traditional counselling alone.

Many of the studies provided by Athena Herd, and those we identified ourselves were international. Although the findings will in many cases still be relevant, this is a limitation in determining impact on patients and service users within the UK. However, Athena Herd also provided its own case study, focusing on services provided to a community group, whose clients are described as vulnerable adults aged 18 to 65 that experience moderate to acute mental health challenges.

Most of this group are either residents in care homes, supported accommodation or semi-independent flats. The EFL programme provided aimed to develop and strengthen self-awareness, emotional literacy, personal boundaries and positive communication. The impact was monitored on a session-by-session basis. Attendees were also asked to complete a detailed questionnaire around the overall experience after the final session. Staff from the community group reported tangible personal progress amongst attendees. Feedback collected from participants indicated that all had experienced development of self-awareness and mindfulness and increased personal confidence. Several reported now having tools that could ‘help to shift their emotional experience in the moment and overcome negative thinking’. The group discussions also provided opportunity for attendees to share feelings.

The Athena Herd case study was with a limited group, for six weeks. The findings are based on self-reported outcomes, and some anecdotal feedback from staff. It would therefore have limitations as a stand-alone study of the effectiveness of EFL.

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<sup>7</sup> Pelyva IZ, Kresák R, Szovák E, Tóth ÁL. How Equine-Assisted Activities Affect the Prosocial Behavior of Adolescents. *Int J Environ Res Public Health*. 2020 Apr 24;17(8):2967. doi: 10.3390/ijerph17082967. PMID: 32344787; PMCID: PMC7216257

<sup>8</sup> Frederick KE, Hazt JI, Lanning B. Not Just Horsing Around: The Impact of Equine-Assisted Learning on Levels of Hope and Depression in At-Risk Adolescents. *Community Ment Health J* 51:809-817 DOI: 10.1007/s10597-015-9836-x

However, within the context of accreditation it helps to demonstrate the potential direct benefits of EFL for vulnerable groups within a UK health and care context.

Overall, we agreed there is some evidence that the activities of EPs benefit service users. However, some of these benefits are derived from the contexts in which EFL is delivered, such as the effects of being outdoors on general wellbeing, or because it is delivered as part of broader counselling and psychotherapy. The evidence for EFL at this point appears overall to be weak, however we recognise this is an evolving field. We would expect AH to be engaged in helping to build the body of the evidence and to use its findings to inform the development of its standards and requirements for registrants.

## **ii. Evidence that any harms or risks likely to arise from the activities are justifiable and appropriately mitigated by the register's requirements for registration.**

AH had identified a number of risks relating to the practise of EFL and set out the mitigations in place against these. Our findings on the key risks are set out below.

### **Risk of injury**

A key risk is that of injury to practitioner, or service users. This is mitigated currently through training on safety; client grounding exercises; having a separate person available to look after the horses during a session; and an annual randomised review of registrant practice and client feedback.

We noted that although AH is also a service provider, its registrants may be offering EFL in other premises including private homes. This means that AH will have less oversight of some of the controls. We think it is important that AH makes sure that registrants offering services in other environments are required to have the same safeguards in place as those working in its centre. This might include only agreeing to carry out work once certain requirements for safety are met by the service user. Mandatory training on first aid and responding to physical injury should be considered.

Where vulnerable service users are being engaged AH ensures that parents, carers or guardian review and sign and provide consent on their behalf. To ensure that the vulnerable service user themselves understand the risks, AH requires a simplified form to be reviewed and signed by the service user. In addition to documentation, we think it is important that registrants are aware of the ongoing need to check that a service users understands the risks of working with horses, and that there is the option for them to withdraw from a session, if they do not feel comfortable.

### **Adjunctive therapies and scope of practice**

AH registrants are likely to combine EFL with other practices. The main adjunctive therapy appears to be counselling and psychotherapy. The risks associated with these practices, such as managing emotional and other boundaries, are also relevant to AH.

AH is an organisational member of the BACP, which is accredited by the Authority. This means that BACP has determined Athena Herd provides safe, ethical and professional counselling and psychotherapy services and training. AH also requires members to be trained to Level 4 in counselling and psychotherapy, to offer these services in conjunction with EFL. We would check the arrangements that AH has for sharing information about complaints outcomes for registrants with other Accredited Registers such as the BACP, through a full assessment.

Although AH has confirmed that being trained to Level 4 is a requirement for the other adjunctive therapies that are offered by members, as noted above some of these services would not fall within the scope of the programme. For example, Neuro-Linguistic Programming is not offered by existing Accredited Registers and would need to be assessed under Standard One separately, to be included on AH's Accredited Register. We would check through a full assessment how AH determines which adjunctive therapies are compatible with its overall aims, including those that are included on a separate directory.

### **Personal behaviour and boundaries**

AH identified the risk that registrants fail to define boundaries with services users, which could lead to a violation of emotional and/or sexual boundaries. The key mitigations in place by Athena Herd to mitigate this risk are its Framework for Professional Standards, complaints process and audit of registrants. The requirements of other registering bodies, such as BACP, are also listed since training in this area is usually a core component of training in counselling and psychotherapy.

For registrants who have not previously received training in this area, including in AH's EFL training would strengthen mitigations. This could support all registrants to establish and maintain appropriate boundaries, reducing the likelihood of complaints in this area.

A further related, risk identified by AH is that service users are not emotionally or mentally protected in their interaction with the registrant, i.e., the registrants' approach to facilitating interactions is not sufficiently sensitive to the feelings and needs of the service user. The key mitigations for this risk are described as requirements for effective signposting, only practising within individual competencies, service users being encouraged to provide feedback on the service, a complaints policy and a randomised audit of registrants. Again, we think this could be bolstered by including as part of AH's core training on EFL. This would allow a focus on the likely specific needs of AH's service user groups.

AH also has a Safeguarding Policy, which includes an escalation route for raising concerns about suspected abuse of an adult at risk, or a child. This specifies that the Safeguarding Officer will contact the relevant Local Authority or Safeguarding Adults Service, so they can take appropriate action. The Policy also details the different forms of abuse and bullying which it expects members, staff, contractors and volunteers to be aware of and alert to. Staff, members and volunteers are required to obtain a Disclosure and Barring Service check.

We noted that 'Risk 12', categorised as 'poor marketing', appeared to be more related to professional and ethical behaviours since it concerned financial exploitation by a registrant and suggest that this should be updated.

Overall, although there are risks inherent to the practice of EFL, including risk of injury from a horse, AH appears to have identified and be actively working to mitigate the main risks we would have expected it to. The areas highlighted for strengthening mitigations would be assessed against Standards Two-Eight through a full application.

### **iii. Commitment to ensuring that the treatments and services are offered in a way that does not make unproven claims or in any other way mislead the public**

We reviewed the information provided by AH about its services, on its website. The information appeared reasonable and line with the evidence it had provided about benefits and risks.

Although AH's Register is not yet live, it has requirements in place through its Ethical Standards for registrations to ensure that service users have clear expectations of what activities can be provided and what outcomes might be achievable. It reviews members' promotional materials and websites periodically and any complaints about unreasonable promotions can be investigated.

The Conditions of Registration require registrants to 'confirm and agree that I will not make false or unsubstantiated claims about the benefit of Equine Facilitated work or in any way undermine the services provided through conventional medicine and health care.' If registrants do make false or unsubstantiated claims, AH envisages they could be removed from the register through its complaints processes.

Since it looks likely that many of AH's registrants would be offering additional services, it will be important for AH to consider how best to make clear what's including in the scope of its Accredited Register, if it presents a full application. We would check these arrangements at the time. In the meantime, we have not identified any information that suggests that AH or its members are making unproven claims about services provided.

## **3. Share your experience**

We received two responses to our invitation to share experience on AH's application for preliminary assessment against Standard One.

One submission by the BACP, with which AH is registered as an organisational member, confirmed through its SYE submission that Athena Herd has agreed to abide by our Ethical Framework and has not been subject to complaint in relation to those standards.

Another Accredited Register raised concerns that AH's registrants provide a range of services including professional and team development. We have addressed that through our consideration of Standard 1a, as above. It also highlighted that AH had not published documents required of Accredited Registers under Standards 2-8, such as standards of professional conduct, competence and fitness to practice. We reviewed unpublished versions of some of AH's registration and complaints procedures during our Standard One assessment. If it proceeds to a full application, we will check to ensure our minimum requirements against all Standards are met.

## 4. Impact assessment (including equalities)

We have not published a full impact assessment since a decision on whether to accredit has not yet been made. However, we have considered which are the main groups likely to be affected by accreditation of AH, and what the main impacts are likely to be in terms of equalities, cost/markets, social and environmental impacts. This has included consideration of our duty as a public sector body under the Equality Act 2010.

There are no current known sources of complete data about the number of Equine Facilitated Learners (EFL). This means little is known about the diversity of AH registrants, or wider EFL workers. To address this, AH has recently developed an Equal Opportunities and Diversity Policy and begun to collect anonymised data about protected characteristics to develop a better understanding of the demographic and social profile of Equine Assisted or Facilitated Practitioners. We welcome this but noted some areas where we think the Form could be updated to allow a more complete capture of data on protected characteristics, and to enable people who are non-binary or who do not want to describe their gender identity to complete the form.

In the meantime, we noted that AH engages with groups including children and young people, and people with mental health challenges. We believe there is a potential positive impact of accreditation for these groups. We did not identify any adverse impacts on groups with any protected characteristics at this point.

We also considered the impact of involving horses are directly involved in the provision of services. AH has a Framework for ethical treatment of horses in place that it expects registrants, and organisational members to follow. These are based on standards of equine care developed by the International Association of Animal Behaviour Consultants (IAABC) and includes a focus on providing appropriate conditions for the nutrition, environment, health, behaviour and mental state of horses. While this gives clarity for registrants, we think it is also important to communicate these expectations to service users. There should also be clear routes for registrants and service users to raise concerns about the treatment of horses during the provision of services, including in places where AH does not have oversight of equine management.

If AH submits a full application, we will invite responses through Share Your Experience again. We will identify specific organisations with knowledge of animal-

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assisted therapies and ethical treatment of animals, within this, recognising that this lies outside the Authority's expertise.

