

# Annual review of accreditation 2021/22

Human Givens Institute (HGI)

June 2021

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## About the Human Givens Institute

The Human Givens Institute (HGI) registers:

- Human Givens Practitioners

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 February 2021, there were 441 registrants on the HGI's register.

The HGI was first accredited on 13 April 2016. This is its fifth annual review and this report covers 13 April 2020 to 13 April 2021.

## 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 [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 also issue Recommendations.

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

## Outcome

Accreditation for the HGI was renewed with conditions for the period of 13 April 2021 to 13 April 2022.

Accreditation was renewed following a targeted review of Standards 11, two and five by a Panel following a review of evidence gathered by the Accreditation team and supplied by the HGI.

The following Condition was issued to be implemented by the timeframe specified:

1. The HGI must update its complaints handling and disciplinary processes so they provide clarity to the public and registrants. The HGI should provide its updated procedures and guidance to the Accreditation team within three months of the publication of this report. The updates must include:
  - Making it clear that the responsibility for taking action in relation to concerns about registrants lies with the Register, and not the complainant. Making it the responsibility of the HGI rather than the complainant to present cases at disciplinary Panels and hearings.
  - Ensuring that there is clear guidance and support for complainants, and that they are aware that the registrant may have legal representation at hearings.
  - Ensuring that its guidance on the complaints process uses consistent terminology and is clear about thresholds for when complaints will be escalated to a formal stage. This includes a review of its Urgent Protection Policy and its process for issuing and reviewing Interim Orders.

The Accreditation team will carry out a review of the effectiveness of the new complaints handling procedures at the HGI's next annual review. This will include an audit of cases to include those that have been resolved through both the informal and formal routes, and an observation of a hearing. (See Paragraphs 11.1 to 11.15)

The following Recommendation was issued to be considered by the submission of the annual renewal documentation:

1. The HGI should review and update the information on its website about its education and training requirements. The update should include details of the timeframes within which they would expect a practitioner to complete the training. (See Paragraphs 9.1 to 9.5)

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. The Authority found that this Standard continued 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 The Authority noted the guidance the HGI had supplied to its registrants during the Covid-19 pandemic. The Authority considered the actions taken by the HGI in response to the Condition issued last year, noting the changes that had been made to its complaints procedure. The Authority had some further concerns and issued a new Condition which could impact on this Standard. This is discussed further under Standard 11.

## **Standard 3: risk management**

- 3.1 There were no significant changes reported or noted in the past year. The HGI provided its updated risk matrix. The Authority asked if there were any additional risks related to registrants' practice arising from the Covid-19 pandemic. The HGI noted that 'Covid is not regarded as an additional risk factor as Human Givens counsellors were already meeting clients on on-line platforms prior to the pandemic and there was already guidance in place for on-line therapy. Online platforms like Zoom are regarded as a good tool for psycho-educating clients on human needs, using guided imagery. The fact that people are getting used to working with such technology, is regarded as an advantage.' The Authority found that this Standard continued 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 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. The Authority noted that the Chair of the Board is new and a brief biography can be found on the HGI's [website](#). The HGI reported on changes to the membership of the Registration and Professional Standards Committee (RPSC) which is responsible for overseeing the registration functions on behalf of the Board. The HGI reported that the RPSC has a new Chair who is an accredited Human Givens therapist and a lawyer and has been involved in several complaints processes, acting as a factfinder and panel member. The

HGI has also appointed a new RPSC co-ordinator, who will be responsible for managing complaints. The RPSC Co-ordinator also has experience of handling complaints and in the completion of Human Rights Assessments, Equality Impact Assessments and Community Impact Assessments. They are also trained in the application of the General Data Protection Regulation (GDPR) legislation and Freedom of Information Act (FoIA) provisions.

- 5.2 The Authority noted the changes in the RPSC. The Authority considered the actions taken by the HGI in response to the Condition issued last year, noting the changes that had been made to its complaints procedure. The Authority had some further concerns and issued a new Condition which could impact on this Standard. This is discussed further under Standard 11.

**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. The Authority found that this Standard continued to be met.

**Standard 7: governance**

- 7.1 There were no significant changes reported or noted in the past year. The Authority noted the changes reported under Standard five and found that this Standard continues to be met.

**Standard 8: setting standards for registrants**

- 8.1 The HGI reported that it has provided regular updates to its registrants over the past year. These include links to government guidance where applicable and to HGI specific guidance such as the *HGI's guidelines on working with patients online*. The Authority found that this Standard continues to be met.

**Standard 9: education and training**

- 9.1 When reviewing the HGI's risk matrix the Authority noted references to a review of the HGI curricula. The HGI reported that this review is taking place alongside the development of the [Scope of Practice and Education \(SCoPEd\) framework](#). SCoPEd a collaborative project between HGI and other Accredited Registers to map the existing core competences and practice standards for counsellors and psychotherapists working with adults. HGI advised that any changes will take SCoPEd developments into account. The HGI reported that: 'The review is being completed by a Principal Fellow of the Higher Education Academy, who is also a Human Givens practitioner, tutor and clinical supervisor. They are supported by a Tutor Group of qualified and experienced teachers, who are also Human Givens practitioners and supervisors. The review is also developing revised standards for Tutors and a quality assurance process of peer observation and development, to ensure quality of teaching and assessment. Once complete, the review will establish a Quality Assurance panel to oversee the ongoing evolution of the curriculum and the quality of teaching and assessment. This panel will be informed by the work of the Research and Update Group, to ensure teaching content is

underpinned by up to date research findings and to advise on any necessary changes.'

- 9.2 Details of the HGI's current education and training requirements can be found on its [website](#). The Authority noted that the information provided was not clear, for example it did not provide any timeframes for completing the diploma. The HGI reported that 'Changes implemented as a result of early work on the review have extended the qualification time between Parts 2 and 3 of the Diploma and require students to work with more clients, under close supervision, to develop their skills, knowledge and competence. Students can now only proceed to Part 3 once their supervisor has indicated that they have reached the necessary level of competence. This is established via supervision discussions and the submission of at least one recorded therapy session. Students must have worked with a minimum of ten clients to completion.'
- 9.3 The HGI also noted that it was intending to introduce a Provisionally Qualified Psychotherapist stage. This would follow Part 3 of the training and cover the first 100 hours of practice or the first year after passing Part 3. Practitioners will be required to continue with close supervision, undertake Continuing Professional Development and use outcome measurement
- 9.4 The HGI noted that it 'recognises that the website needs clarification in terms of the hours of online and in person study, time with a supervisor and the amount of self-development a student is expected to undertake (reading, practicing etc.). Changes to it will be informed by the review.'
- 9.5 The Authority considered the information on the website and that provided by the HGI about its proposals. The Authority decided to issue a Recommendation: The HGI should review and update the information on its website about its education and training requirements. The update should include details of the timeframes within which they would expect a practitioner to complete the training. (Recommendation 1) The Authority also requests that the HGI keep the Accreditation team informed of any changes that are made as a result of the review.
- 9.6 The HGI reported that it had paused 'face to face' training and assessments during each lockdown. The HGI noted that 'given the nature of the training of therapists, which often involves live practical demonstration and role play, it was judged that it was inappropriate to adapt it to online learning. As a result, some students have had their training delayed, but this has ensured that the quality and standard of teaching, learning and assessment has not altered.' No other changes have been made.
- 9.7 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. The Authority found that this Standard continues to be met.

#### **Standard 11: complaints and concerns handling**

- 11.1 At last year's annual review, the Authority issued the HGI with Conditions to:

a) review and update its complaints procedures and provide an updated version to the Accreditation team within six months. The HGI's review should ensure that its processes comply with good practice and the law and should include consideration of EDI issues, the Human Rights Act and those points raised within this report and the external report, previously commissioned by the HGI.

b) provide a plan to the Accreditation team about its implementation of the new process which should include the development of guidance documents such as guidance for making decisions at the investigation stage, guidance for holding hearings and guidance for registrants.

- 11.2 The Moderator reviewed the actions taken by the HGI in response to the Conditions including its work on ensuring compliance with the Human Rights Act 1998 and the Equalities Act 2010, the inclusion of mediation and the requirement for all formal processes to now result in a hearing which is attended by all parties. The Moderator however still felt that certain aspects of the HGI's processes were not clear for example any triage processes the HGI had in place for handling complaints, how the HGI handled interim orders and the publication of lower level sanctions. The Moderator was also concerned about the prospect of the complainant being responsible for the prosecution of the case, where they are likely to be vulnerable and not as familiar with the HGI processes, codes and standards. The Moderator therefore requested that a targeted review be carried out to explore these areas.

#### **Triage Process**

- 11.3 The HGI confirmed that it reviews all complaints that are received to see if they are suitable for informal resolution. This is carried out by the Complaints Co-ordinator in consultation with the Chair of the RPSC on receipt of a complaint. Only those that are suitable for informal resolution will go through this route. The HGI complaints procedure lists the types of complaints which are not suitable for informal resolution and which will always go through the formal procedure. The HGI also reported that any complaints against a registrant who had been the subject of more than two complaints dealt with through mediation within the past two years would be handled through the formal route. The Authority reviewed the procedure and noted that while it does state that some types of complaints will not be suitable for informal resolution, it is not clear that a triage process takes place and when since the process as written suggests that all complaints are considered for informal resolution in the first instance.

#### **Interim Orders**

- 11.4 The HGI's process for issuing interim orders is considered in the HGI's [\*Urgent Protection Policy\*](#). These can be considered at any point in the process. During our interview with the HGI, it was indicated that the Chair and Complaint Co-ordinator would be responsible for considering complaints against its *Urgent Protection Policy* unless the Panel had been convened, in which case it would fall to the Panel to make a decision. The Authority noted that the policy states that this decision will be made by 'two or more members of the RPSC, to include the Chair or the Deputy Chair.'



- 11.5 The Authority reviewed the *Urgent Protection Policy* and noted that the policy states that ‘In cases where a therapist appears to pose a risk to clients or other members of the public, steps shall be taken to suspend them from practising. This will involve the use of an interim suspension order for 30 days, with the option to extend this beyond 30 days, as necessary’ and that ‘In the case of Registrants of the HGI and trainee status therapists, a notice to the effect that their practice has been suspended whilst they are under investigation for an alleged breach of the [HGI Code of Ethics and Conduct](#), shall be displayed on the publicly accessible online Current Upheld Complaints page of the HGI website...The therapist concerned shall be instructed that they must not practise as a therapist for the duration of the suspension order and that any breach of this condition shall result in their removal from the HGI Register and termination of their membership of the HGI.’ The Authority noted that the policy doesn’t provide much indication of the types of cases or behaviours that would trigger the use of an interim order.
- 11.6 The HGI confirmed that a registrant would have the right to appeal an interim order, this however is not mentioned in the *Urgent Protection Policy*. The Authority also reviewed the [Indicative Sanctions Guidance](#) which refers to the *Urgent Protection Policy* and again this doesn’t refer to the registrants right of appeal. The team noted that [How the HGI deals with Complaints](#) doesn’t reference the *Urgent protection Policy* and it isn’t clear that interim orders may be considered.

### **Sanctions**

- 11.7 The HGI has introduced the use of letters of advice. The HGI’s *Indicative Sanctions Guidance* states that ‘The provision of providing advice is the measure that can be applied and may, therefore, be appropriate where the failing or conduct is at the lower end of the spectrum. The provision of advice has no direct effect on a practitioner’s practice and should only be used if she or he is fit to continue practising without any restrictions. The provision of advice will remain on the Therapist’s record (held by the Human Givens Institute) for a set period of time, to be determined by the RPSC.’ Letters of advice are not published but will be taken into account if the registrant is subject to further similar complaints.
- 11.8 The HGI confirmed that it has removed admonishments from its process. The HGI has the following sanctions available: Conditions of Practice, Suspension and Removal, all of which are published on the HGI’s register. The Panel noted however that the *Guidance for registrants* still states that registrants can be admonished.

### **Complainant presenting their own case at a hearing**

- 11.9 The HGI reported that it is important for the Human Givens approach that the complainant’s voice is heard. The HGI also recognises that it is important in terms of natural justice for the registrant to be able to ask questions of the complainant at a hearing. The HGI has updated its procedures so that all parties are now present at the same meeting. Under its current process the complainant would present their complaint themselves, although they could have a friend or supporter there who could speak on their behalf or their statement could be read out. The HGI reiterated that there is no requirement

on the complainant to present at a hearing, although they would expect a complainant to be present to answer questions. All questions to the complainant are put through the Chair of the Panel. The HGI confirmed that the complainant would be given a full briefing by the Complaint Co-ordinator about what to expect at the hearing and they noted that they are planning to develop further advice.

- 11.10 Previous Accreditation Panels have had concerns over complainants presenting their own complaints at hearings given the vulnerability of complainants and considering that cases that are being put before a complaints hearing are usually serious in nature. The HGI highlighted its risk assessment process which it has been developed to ensure that complainants and registrants get the support they need in order to take a case through the process.

#### **Panel's decision**

- 11.11 The Panel first considered whether the Conditions issued last year were met. The Panel noted that the HGI had reviewed and updated its complaints process and that it had carried out some work towards ensuring that its processes were compliant with the Human Rights Act and its Equalities Duties. The Panel also noted that the HGI had provided its implementation plan along with the updated complaints process to the team within the required timeframe. However, the Panel noted that the changes made were not fully in line with what it considered to be good practice, in that it is now requiring complainants to present their own case at a hearing.
- 11.12 The Panel considered the HGI's view that the complainant should be allowed a voice in the process and that it was important not to paternalise the complainant. The Panel recognise and support the HGI's that complainants should have a voice, and agree that this is good practice, however the Panel considered that the HGI should be responsible for prosecuting a case. The Panel noted that the registrant is likely to have legal representation and that this creates an imbalance in the process despite the mitigations put in place that allow the complainant to take a representative as well. The Panel noted that the processes were not clear that representation for complainants was allowed. We consider that it is the registers' responsibility to uphold its own standards and as such it has a responsibility to ensure that it thoroughly investigates concerns and complaints where a registrant may be in breach of its standards. The Panel found that placing responsibility on the complainant to present the case against a registrant is contrary to this. Whereas it may be appropriate for the complainant to outline concerns themselves where minor breaches have occurred and where an informal process is being used, it is not appropriate for more serious cases which necessitate a hearing.
- 11.13 As well as the potential for power imbalance, the Panel noted that complainants being required to present their own cases could potentially act as a barrier to complainants raising concerns themselves and could put extra pressure on those who are already vulnerable. This was considered to have a potential impact on Equality, Diversity and Inclusion which had not been identified by the HGI's own review in this area since its last accreditation renewal.

11.14 The Panel considered the procedures and guidance provided to the Authority and the additional information supplied by the HGI and found that the HGI's procedures and guidance were not clear about its triage process and processes for interim orders as outlined above. The Panel also noted that there were some inconsistencies between the procedures and the guidance. The Panel decided to issue the following Condition:

- 11.15 The HGI must update its complaints handling and disciplinary processes so they provide clarity to the public and registrants. The HGI should provide its updated procedures and guidance to the Accreditation team within three months of the publication of this report. The updates must include:
- Making it clear that the responsibility for taking action in relation to concerns about registrants lies with the Register, and not the complainant. Making it the responsibility of the HGI rather than the complainant to present cases at disciplinary Panels and hearings.
  - Ensuring that there is clear guidance and support for complainants, and that they are aware that the registrant may have legal representation at hearings.
  - Ensuring that its guidance on the complaints process uses consistent terminology and is clear about thresholds for when complaints will be escalated to a formal stage. This includes a review of its *Urgent Protection Policy* and its process for issuing and reviewing Interim Orders.

The Accreditation team will carry out a review of the effectiveness of the new complaints handling procedures at the HGI's next annual review. This will include an audit of cases to include those that have been resolved through both the informal and formal routes, and an observation of a hearing. (Condition 1)

11.16 The Panel found that this Standard was met with Conditions.

### 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 the HGI during the accreditation year.

### Impact assessment

13.1 There were no significant changes reported or noted in the past year. The Authority had regard to the impact of its decision to reaccredit the HGI with Conditions.

### Equality duty under the Equality Act 2010

14.1 Last year the Authority issued a Condition to the HGI to review and update its complaints procedure to ensure that it was compliant with EDI requirements. The HGI put in place an EDI assessment as part of its risk assessment for each complaint received. The Panel noted the work that the HGI had done to include EDI assessments as part of its handling of complaints. The Panel noted that placing the responsibility for presenting a complaint at a hearing

with the complainant, given the likely vulnerability of the complainant and the seriousness of the cases likely to be considered suggested that EDI considerations may not have been fully considered. The Panel was concerned that this could be a barrier to people raising complaints due to the additional stress this could put on vulnerable person.

- 14.2 The Authority had regard to its duty under the Equality Act 2010 when considering its decision to reaccredit the HGI with Conditions.