



ACC REGISTER ADVISORY PANEL (RAP) MEETING

Zoom Meeting
Friday 18th June 2021
1.00pm – 5.00pm

Minutes of Meeting

Attendees

Independent.

Catherine Clarke, Chair RAP (CC)

Richard Needle (RN)

Heather Churchill (HC)

Fiona Stevenson (FS)

ACC

Kathy Spooner, ACC CEO (KS)

Sue Monckton-Rickett, ACC Chair (SMR)

Dawn Sherry, ACC Registrar (DS)

Gillian Stuart, ACC Head of Membership Services (GS)

Apologies

Doreen Rowland (DR)

1. Welcome

CC welcomed everyone and a special welcome to the new ACC Head of Membership services – Gillian Stuart. Panel Members introduced themselves.

2. Prayer

Prayers were offered.

3. Conflicts of interest

KS wanted it noted that in a private capacity she is part of a women's group that FS has set up for women in Christian leadership roles. As this group unique for Christian women in leadership, the panel felt that this was an appropriate involvement and had no direct conflict.

4. Notes of last meeting and matters arising

The minutes of the last meeting (19/03/21) were accepted as a true record. In matters arising ACC will regularly report registrant numbers to RAP, will continue to work on developing their new complaints process, including an appeal process, and will continue to seek to recruit to RAP hoping to attract candidates from diverse/underrepresented backgrounds.

5. Organisational Update: KS / SMR

Current Priorities

KS shared with RAP the list of priority tasks agreed by the Board. There is a much longer list of projects and tasks – but it is recognised that with a small team not everything can be achieved in the desired timeframes.

The SCoPEd project is a significant project for ACC and the wider profession and involves some intense periods of work and preparation. ACC plan to continue their involvement with this project.

The re-write of the ACC Ethics & Practice Guidelines is important, as these have not been updated since 2004. However, the ethical principles set out within it remain relevant and keeping with other counselling ethical codes. An Ethics & Risk Advisory group of ACC members have met to help with the review and update of the code of ethics.

Another priority is to improve the services we provide to our members and members of the public. This will be the remit of the Head of Membership Services as will growing our memberships in other ministry and professional areas.

We will continue to offer training and forums through zoom, as these seem popular with both members and non-members of ACC.

We are also continuing to run the NHS Crisis Counselling support Service (CCSS) whilst we are being funded. Some funding has already been received from the NHS and more is expected in 2021/22.

6. ACC Counselling Update:

KS informed RAP that the PSA have given ACC reaccreditation of the register for another year. We have one recommendation which is that we should consider publishing our new complaints process. The PSA want all register holders to look at the benefits of taking a mediation approach as appropriate within their complaints process. ACC have been trialing a mediated dialogue process for circa 12 months and it works well. We need to make some final tweaks to the draft process; update the documentation and we should then be ready to publish in three months or so.

The PSA are proposing changes to their registration standards for all registers. We are not yet in a position to do a full impact assessment as the changes are not yet finalised. We do need to make sure we have any agreed changes in place to meet the new standards when we are next subject to a full assessment (sometime in the next three years). At the moment we don't envisage any major issues with being able to meet the revised standards.

ACC CPD Training

ACC has produced a diverse program of CPD for its members and non-members. Some has been offered for free, others for a reasonable fee with a member's discount. ACC needs to consider the pricing of these training events as we need to balance covering costs, bringing in surplus income with offering affordable CPD.

7. SCoPEd Update:

The SCoPEd project is concerned with entry level standards and a differentiated competency framework for counsellors and psychotherapists. The hoped-for benefits include greater transparency for trainees

and employers and for counsellors as they move through professional development and maybe most importantly for members of the public. The contributions of the new partners in reviewing the competency statements has been of immense value, and this being its third and planned final iteration the hope is that many of the issues that have caused disquiet will have been resolved or better explained.

8. New Registration / Accreditation Process:

ACC are proposing to change the number of training hours that are needed to join the ACC register. At present, registered counsellors must have been trained to at least a Level 4 Diploma standard with 420 Guided Learning Hours (GLH) and a 100-hour placement integral to the course.

Recently ACC denied registered membership to an applicant who had originally qualified from a course with 300 GLH hours. We were surprised to learn that the applicant could apply for registered membership with the BACP. From ACC's involvement with the SCoPEd project, we then discovered that BACP did not specify GLH for their one year full time or two year part time diplomas. On further enquiry it was confirmed that applicants for the register who have completed courses with circa 300 GLH and above can join the register. It was further discovered that these same standards apply to NCS and COSCA. All three bodies have comparable register entry and accreditation processes to the ACC.

ACC approached the PSA's accreditation team to see whether they could foresee any difficulty with ACC revising our 420 GLH standard in the light of these discoveries and whether we would need to go through a formal change control process to do this. The authority's view was that this was a reasonable change given the proximate comparability of the registers

HC asked whether the accreditation standard would remain as 450 hours (in line with BACP) and KS confirmed that there were no plans to change this and indeed our inclusion in IAPT services was based on the common accreditation standard. However, the discovery about the variability in level 4 training helped to explain why accreditation has been so significant in relation to employment because it is a 'knowable' standard.

CC argued for the importance of transparency, that ACC should make it clear that when members join the register that accreditation reliant on having 450 hours of training.

The RAP stated their support for the proposed changes.

9. Audit

There were two issues relating ACC's revised audit process that KS brought to RAP.

We are aware that despite efforts to communicate well with members, being selected for audit remains a stressful process. In order to minimise the stress, we want to firstly take up RN's suggestion at a previous meeting to rename 'audit' to 'practice review'. We will also place something on the website for members to know what the practice review entails so that they can review their practice at any point. We also want to separate out the practice review / audit from renewal because this creates an artificial stress on the three-month time period given to complete and assess the audit.

Secondly, we have discovered that two new therapy accredited registers are auditing 5% of members, whereas ACC is currently auditing 10% of members. Audits are not uncovering any major issues with regard to practice standards. One member has left as part of the audit (relating to a breach of the MOU), and another has been visited to help her sort out her record keeping process. Otherwise, the outcomes of audits have been advisory and relate mainly to length of time with the same supervisor. Undertaking audits is costly for members (time and stress) and for ACC (fees paid to assessors).

KS met with the PSA's accreditation team to discuss their view of the proposal to reduce the practice review/ audit to 5% of members unless and until we discover indicators of lapse in practice standards. They concluded that we had considered the matter carefully and in the light of the risk profile of our members 5% seemed a reasonable figure.

RN commented that through the audit process, members know that their practice is being looked at, so are keeping themselves up to date with their practice (CPD, Logs etc). ACC need to be confident in our members that they are adhering to practice guidelines and bear in mind our responsibility to the public.

GS suggested ACC members could be encouraged to have an informal mini practice review each year, completing a self-audit with their supervisor.

RAP supported the proposals to rename audit to practice review; de-couple the process from annual renewal and reduce the percentage of members audited from 10% to 5%.

10. Accreditation:

ACC are proposing changes to the accreditation process. The existing application is almost entirely dependent on a case study with one client to showcase the counsellor's abilities and competence. There is also a reflective essay on how the counsellor's Christian faith informs their practice if the counsellor has not trained with a training organisation that has a Christian worldview. With the development of a shared SCoPEd framework, it is likely that accreditation will remain as a means of assessing the professional development of a counsellor. So, there is some merit in looking at how comparable membership bodies accredited members, as well as thinking about how ACC can best assess the differentiation between a registered and an accredited counsellor in order to best serve our members, employers and members of the public.

Other membership bodies make good use of reflective writing assignments for accreditation, inviting applicants to comment on for example issues of inclusion and diversity. Also, there are limitations involved in showcasing depth of approach using material from one client which the case study model demands. Case studies tend to be included in qualifying training – so there is no de facto test in including them in accreditation.

The new accreditation process provided for RAP to review therefore moves away from a case study to a series of essays which allow a counsellor to write about how their understanding and practice has developed since qualification. The main submission will be a reflection on theory in practice where the counsellor is able to use work with more than one client to critically appraise their practice setting and the strengths and limitations of their preferred counselling approach. There will be two further shorter pieces of reflective writing out of a choice of 4 subjects.

CC commented that in principle this would work well. Drawing on different client examples will tease out more information.

Christian Sponsor

RAP discussed the requirement for a Christian Sponsor when assessing professional compliance and competence. There was a question as to whether this was appropriate. The requirement to verify that a member is someone who identifies as a Christian seems a reasonable one when entering into and renewing registered membership. However – this should not be a 'test of faith' and the question needs to be sensitive to those who are between fellowships for whatever reason. However – there seems no value in rechecking this in audit, and the questions previously asked of Christian sponsors in accreditation (for example their contribution to community life and their suitability for accreditation) have no relevance to professional practice.

RAP advised ACC to relook at their requirements to have a Christian sponsor in audit and accreditation.

12. Complaints Report SMR:

SMR went through the complaint report

14. Recruitment to RAP:

RN has been on the RAP panel for 3 years and it is time for him to step down or continue on the panel. RN said he was happy to stand again, and the voting members of RAP welcomed his decision to continue.

ACC has not managed to recruit any new RAP panel members since FS despite appeals via email and in Accord. The panel acknowledged the value of including the client advocacy perspective, although it was noted that formally recruiting an EBE and supporting their attendance may incur costs.

15. Public Engagement

ACC held an open forum on the Churchill Framework which was open to ACC and non-ACC members and this was really well attended.

SMR has done a radio interview and will speak at Central Hall in London at a community healthcare seminar.

16. <u>AOB:</u>

None

DONM - Next meeting is September 24th, 2021 (zoom)