28th November, 2016.

Public Consultation,
Professional Regulation Unit,
Department of Health,
Hawkins House,
Dublin 2, D02 VW90
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Proposed regulation of counsellors and psychotherapists under the Health and Social Care professionals Act 2005

Dear Sir/Madam

We are a group of Psychotherapists working in the Novara Centre, Bray, Co. Wicklow. We have been providing psychotherapy/counselling and psychology services to people in Bray and the surrounding areas since 2005. During that time our services have expanded to include Adult, Adolescents, Child and Couples psychotherapy/counselling and there are currently 11 psychotherapists/psychologists working in the centre.

As we have developed our practice and services, we have engaged with other Health Care providers including GPs, to encourage the use of psychotherapy/counselling to help clients experiencing mental health difficulties.

In response to requests for submissions concerning the proposed regulation of Psychotherapy and Counselling in Ireland, under the headings set out in Appendix 1.

1. Whether the professions of counsellor and/or psychotherapist ought to be subject to State regulation

We welcome the proposals to introduce state regulation of the professions of Psychotherapist and Counsellor. It is critical that people who avail of these services can be assured of high standards of training and governance. Both terms ‘psychotherapy’ and ‘counselling’ should be regulated separately under the Act.

‘Psychotherapy’ and ‘Counselling’ are umbrella terms that cover a range of talking therapies and working with both the ‘conscious’ and the ‘unconscious’. They are delivered by qualified practitioners who work with people over the short or long term to address mental health conditions or difficult personal situations that cause difficulties or stress. Psychotherapy and Counselling can be hugely beneficial for many people in a wide variety of situations by offering a neutral, non-judgemental, confidential service.
Therapy can provide a place to explore complicated issues/decisions or address existential and identity questions. A qualified practitioner will help people reduce the symptoms of mental health conditions (such as depression, anxiety, phobias, personality disorders, bipolar disorder, etc.) and cope with natural life events (like grief, crises, medical conditions, etc.) They can also help people begin to heal past traumatic situations or events, like abuse or neglect. Finally, they can support people to look exploring how their own core beliefs can contribute to their pain and difficulties i.e. relationships, stress, addiction etc.

As the roles of Psychotherapist and Counsellor are complex, it is important that the regulatory model apply best international practice. While the view of the Government is that the Regulatory Body be ‘neutral’, it is also important, particularly where complaints arise, that there is sufficient professional therapeutic knowledge and understanding within those overseeing complaints - in particular around the dynamics that can occur between psychotherapist and client. We welcome the protection that these regulations will bring to ensure that people are not exploited or exposed to poor or unqualified practitioners. However, it is also important that Psychotherapists and Counsellors have a competent and professional forum, where complaints from clients (who may be experiencing negative feelings which can arise normally as part of the therapeutic relationship) can be heard.

The regulatory model will need to include clearly defined Governance and Ethical frameworks including Complaints/Disciplinary Procedures. We suggest that at least two independent psychotherapeutic professionals from outside our country to be involved in any complaint procedures and that all those involved in hearing complaints are trained in complaint handling, natural justice and ethics.

2. If so, whether the professions ought to be regulated under the Health and Social Care Professionals Act 2005 or otherwise.

We agree that both professions are regulated under the Health and Social Care Professionals Act 2005, particularly as other professions who also offer psychotherapy/counselling i.e. Psychologists and Psychiatrists are also regulated under this act.

However, we feel that the title of the Act i.e. ‘health and social care’ phrase does not specifically mention ‘mental health’. As awareness of mental health and associated services is continuing to grow, it is important that there is transparency and clarity about how it is regulated. Could the word ‘health’, be expanded to include, mental or emotional or psychological health?

3. If the professions are to be regulated under the 2005 Act whether it would be appropriate to regulate one or two professions under one registration board.

Yes, it is appropriate to regulate both Psychotherapy and Counselling under one board, particularly as many practitioners use the word interchangeably. However, each profession would need to be clearly defined and explained in easy to understand terms.

Our experience is that there is a great deal of confusion and lack of understanding about each of these terms - both for those accessing these services and other health professionals who may want to refer clients for psychotherapy or counselling. While many psychotherapists also use the term ‘counselling’ to describe their profession, not all counsellors are trained as psychotherapists. As the ICP have pointed out there can be quite a difference in the training, experience and qualifications of both professions. Due to the lack of regulation of these professions in the past and the variance in training and experience, it would be unwise to have both professions and titles interchangeable.
It is important that clients and those who refer clients for services, have sufficient information about both professions in order to be able to make an informed decision about the suitability, training, and experience of the practitioner they are choosing for the emotional/mental health issue that is presented.

It is also unclear of the future role of the current accrediting bodies e.g. IACP, IAHIP, when the new registration board comes in. Will psychotherapists need to also register for both Coru and a psychotherapy body for example. This could be quite costly.

4. **The appropriate level of “grand parenting” qualifications to be set for existing practitioners having regard to the QQI Awards standards**

For many years there was a small number of (mainly private) colleges that trained psychotherapists/counsellors. While the training was extensive and fulfilled much of the criteria set out in the QQI awards, these college could only award Diplomas. More recently, 3rd level Colleges and Universities are offering Degree and Masters programmes in Psychotherapy counselling. The current cadre of psychotherapists/counsellors will include practitioners who have both Diploma, Degree, and Post Grad qualifications.

We suggest that under Grandparenting, psychotherapists and counsellor who wish to register under one or both titles would need to have either the required qualifications (e.g. degree or diploma) and are working as psychotherapists and counsellors for at least two years and are accredited with a recognised body e.g. IAHIP, IACP.

5. **The appropriate level of qualifications to be set for future applicants for registration having regard to the QQI Awards standards**

The QQI Awards Document sets out the standards required to qualify as a Psychotherapist/Counsellor. We welcome the view that theoretical knowledge is not sufficient and that training programmes should have at least 120 hours of supervised client work.

However, we feel that the Section on ‘Self’ in the QQI document is inadequate and falls short in setting out the standards and personal development and knowledge required for psychotherapy practice. (This may be different for ‘Counsellors’).

It has long been established that personal psychotherapy is one of the key elements of personal development and training for a psychotherapist. The view of the QQI that personal development ‘may be achieved through personal psychotherapeutic experience (or equivalent learning)’ is in our view a significant departure from a key element of the training of psychotherapists. The psychotherapists self-knowledge and ability to internally ‘supervise’ what is happening in the therapy session is critical to being able to provide safe, secure and unbiased holding for the client. It is particularly important for the therapist dealing with difficult issues such as trauma and sexual abuse. It is not clear why this requirement to engage in personal therapy, which is currently a part of psychotherapy accreditation, is being ‘watered down’.

The role of psychotherapist and counsellor requires enormous self care and regular supervision and training/ongoing professional development. It is not clear how this will be monitored or regulated.
If there are two titles (Counsellor and Psychotherapist) registered and regulated, then the qualifications for both need to be set out in the QQI. We recommend that the qualification and training requirement for Psychotherapist is higher than that of Counsellor and suggest Level 7 (Counsellor) and Level 8 (Psychotherapist) on the QQI awards.

The other issue that we would like to raise is the growing number of psychotherapy/counselling courses on offer and the growing number of graduates. We feel that there needs to be some matching of courses/participants to the number of psychotherapists and counsellors required in Ireland.

6. The title or titles that ought to be protected for the exclusive use of registrants.

As we do not agree that the titles of ‘Psychotherapist’ and ‘Counsellor’ are interchangeable, both need to be protected under the regulation, each with the appropriate and clear definitions of these terms.

Yours sincerely,

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Mary Galligan
Clare Hickey
Marina Hunt
Elizabeth Keating
Kate McCarthy