

Submission on the proposed regulation of counsellors and psychotherapists under the Health and Social Care Professionals Act 2005

Introduction:

My name is Attracta Gill I have a number of expertise in different areas within the Counselling & Psychotherapy Profession which allow me to give you an overview and suggest recommendations to the proposed regulation of Counselling and Psychotherapy in Ireland. I've completed two core trainings in Psychotherapy in Ireland and one in Europe. Furthermore I hold an MA in Humanistic & Integrative Psychotherapy from the University of Limerick. I've also held numerous training positions in different IACP and IAHIP accredited colleges. I served as a Director of IACP for 2 years from 2012 to 2014. I have also served on the Accreditation Board of IACP and the re-accreditation Board of IAHIP. I've worked as a Psychotherapist within the Mental Health Services of the HSE. I have held a number of positions academically and ethically within this profession and believe that I have a lot to offer this discussion. Presently I am Director and Owner of Primary Care Psychotherapy in Vista Primary Care, Naas, Co Kildare.

I have a commitment to the profession of Psychotherapy and a commitment to the ethics of Psychotherapy. I believe that the public needs to be protected and that we need to rise above in-house disagreements and the ambitions of any one or more accrediting bodies.

Having outlined my background and as an accredited member and supervisor of IACP, IAHIP and the European Association of Psychotherapy I believe that I am particularly qualified to make a representation to the Minister for Health Mr Simon Harris TD concerning the proposed designation of the professions of Counsellor and Psychotherapist in accordance with the Health & Social care Professionals Act 2005.

My submission is structured in line with the section headings set out in the consultation document.

- **Whether the professions of counsellor and/or psychotherapist ought to be subject to State regulation.**
1. I'm writing this as I have no vested economic interest in any of the Accrediting bodies or training schools. When you ask for interested parties and organisations to make representations it is important to understand that the Accrediting Bodies and schools are business's and this may not always be in the best interest of the service user. I believe that taking licenses into a government body is a positive move as it will remove it from the field of the private sector. This will promote an ethical and professional public service which in turn will bring more transparency and accountability for the profession as a whole and further protects the public.
 2. Also I believe that in the interest of ethical standards and service user protection any state body governing licensing of Counselling & Psychotherapy will also need to hold a high standard of professional conduct and training in the case of malpractice.

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

1. Over the last 20 years I've seen an explosion of Counselling and Psychotherapy Courses particularly in the boom years and now a statutory registration body is needed more than ever. In my supervisors practice I've seen courses range from min of 2 years to 4 years, from 450 hours of class contact time to well over 1,000 hours class contact time. Students enrolling on these courses are promised that they will be equipped to work competently with clients. In my experience some of these graduates do not meet certain standards and I certainly believe that after 2 years training some are not able to deliver a safe practice to the public.
2. Historically there has been much in-house disagreement between both IACP and IAHIP. As I am a member of both of these main Accrediting Organisation's I would like to state that it is not necessarily that one is better than the other. I believe that the main difficulty stems from the fact that they are both accrediting different professions at different minimum standards.
3. This area has been beset by a lot of confusion and given the vulnerability of the population that both professions are working with, it is a matter of urgency that these 2 professions are appropriately separated out.

I'd like to make a number of responses to the questions raised by the Minister.

- In order to meet professional standards and work in a lawful safe and in an effective manner, the regulation of Counselling & Psychotherapy needs to be addressed.
- There needs to be a central standard that reflects national and international standards.
- I am in favour of regulation of both Professions on a separate register and for the essence of the Health and Social Care Professionals Act 2005. We need to regulate high standards of professional training and education.
- Traditionally in the profession the terms counselling and psychotherapy can be used interchangeably but professionally they signify 2 different levels of training.
- Traditionally counselling is seen as a shorter therapy working with adjustment difficulties but not acute mental health issues. Psychotherapists are trained in more Depth Psychology and work in conjunction with other colleagues such as Psychology and Psychiatry allowing them to engage with clients diagnosed with personality disorders and acute mental health issues. These titles are reflected in the comparison of training standards between Counselling & Psychotherapy set out below (ICP Position Paper 2015).

COMPARISON OF TRAINING HOURS BETWEEN COUNSELLING AND PSYCHOTHERAPY

	Counselling	Psychotherapy
Prior Academic Study:	N/A	3 yrs/1,800 hrs
Specific Training:		
Theory/methodology	450 hrs	500 – 800 hrs
Clinical Practice	450 hrs	300 – 600 hrs
Personal Development/ Personal Therapeutic Experience	50 hrs	250 hrs
Supervision	not specified	150 hrs
Minimum Time:	950 hrs + supervision hours / 3 years	3,200 hours / 7 years

- **The appropriate level of qualifications to be set for existing practitioners and future applicants having regard to the QQI Awards standards.**
 1. Currently Counsellors are accredited predominantly by IACP which has a lower set of criteria for membership. As a former Director of IACP and having served on the reaccreditation committee of IAHIP I experienced first-hand the difference between the criteria of both. This difference is significant and for example with IACP, a therapist can get accredited by having completed significantly lower academic study; clinical practice hours; supervision hours; and personal development work. However it is also true to say that within IACP there are more experienced psychotherapists whose greater clinical experience are not reflected within.
 2. Furthermore, in August 2013, IACP surveyed their membership about the difference between Counselling and Psychotherapy, receiving over 700 responses. The responses to the survey showed that a majority of respondents (70%) answered “Yes” to the “Yes or No” question about whether they believed there was a difference.

3. This shows that an overwhelming majority (70%) of members within IACP recognise a distinction between the Profession of Counselling & Psychotherapy which is critical to protect both the service user and the practitioner themselves. Practitioners need to be protected by working within their level of competence. Working beyond your level of competence as a counsellor with clients diagnosed with personality disorders and acute mental health issues puts not only a strain on the professional but brings the whole profession in disrepute. As a trainer and supervisor I believe that the risk to patient care cannot be over emphasised.
4. I undertook one of my core 5 year trainings in Europe (Switzerland) and I'm aware of the high European standards held by the European Association for Psychotherapy. In the UK they are struggling with the complications of listing both professions under the one umbrella and given that they are encountering serious difficulties I am not in favour of blindly following their direction. Our European neighbours hold high educational and clinical standards and the Irish Council for Psychotherapy are currently on par with these standards. Level 9 on the National Framework of Qualifications represents the minimum current academic qualification for ICP and ECP accredited Psychotherapists. I am in favour for the retention of these current academic, training, clinical and accreditation standards for Psychotherapists. Many experienced psychotherapists like myself have membership with both bodies as we supervise both counsellors and psychotherapists. It is our responsibility to be transparent with the public about the different levels of training and expertise at the 2 levels. The public have a right to choose which level of care they receive.
5. This of course has implications for grand parenting in terms of allowing each accrediting body grandparent their members in. All members of IAHIP have a certain standard and can more or less be reliably grand parented. Some members of IACP (which is a much more diverse membership group) also have this standard but many don't. A clear criteria to upskill from Counsellor standard to Psychotherapy standard needs to be outlined which takes into consideration the academic, clinical and personal development difference between both. More care needs to be given to how a counsellor might upgrade to become a psychotherapist. New entrants must follow the new guidelines. This must be progressed with due diligence so that members from both organisations have a pathway for both professions.

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

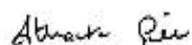
'Rather than providing for a longer-term two-step approach, however, the Minister is proposing the designation under the Act of two professions (counsellor and psychotherapist) each with its own register. Those with the required qualifications could be granted registration on both registers.'

1. It is important that the significant different standards of training of both professions are recognised and therefore I strongly recommend that there should be a 2 tiered independent separate registration board for the profession of Counselling & Psychotherapy. Students who enrol in future training will be clear whether they are training for the profession of counselling or psychotherapy. Training schools will need to be monitored so that they don't over promise or over exaggerate the resulting qualification.
2. In order to protect service users both titles of Counselling & Psychotherapy need to be protected. Referral agencies need to be made aware of the difference, so that the titles are used exclusively and employers such as the HSE need to be made aware of the difference of both professions before offering positions.
3. There are lots of other sub groups such as guidance counsellors and addiction counsellors which will need to be looked at a differentiated level. These discussions are around areas of competence and will need to be discussed further.

Conclusion

On a finishing note it is important to underline that central to my submission is the crucial issue of standards and the protection of our service users the public. It is not that one profession is less than the other. Counsellors need to be supported to be able to work within their level of competencies. Psychotherapy also has a ceiling and knowing our ceiling is important so that we can be active with colleagues in other professions and maintain good allied professional interdisciplinary dialogue so that all professions are clear about their competencies and limits.

Signed



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