

NRHP QUINQUENNIAL REVIEW

JUNE 2008

The following is the report issued by UKCP. We are pleased to announce that NRHP has passed this review. If any members are interested in volunteering for any of the working parties or bodies mentioned please contact the office at admin@nrhp.co.uk

Jon Beilby
Executive Officer

29 July 2008

Hypno-Psychotherapy Section
Quinquennial Review and Section Investigation
Assessment Visit Report
05 June 2008
National Register of Hypnotherapists and
Psychotherapists (NRHP)

2008 NRHP QR and Section Investigation
Report

Background:

This report combines the scheduled Quinquennial Review Process assessment visit with the elements of the investigation assessment for the UKCP's Hypno-Psychotherapy Section. For the purposes of the assessment criteria were defined (See Appendix A) for reference alongside the core UKCP Training Requirements (appendix B).

Although the primary focus and construction of the assessment visit was the QR process, the adjustment to the Sections procedures occasioned by the extant situation within Section and the reality of the ongoing investigation into the Section's MOs and the Section's procedures and standards inevitably influences the structure of this report and the criteria behind the assessment.

Ultimately the intention is that the process will ensure that each organisation with the Hypno-Psychotherapy Section has completed a QR assessment process that is:

- clearly aligned with QR practice across the organisation;
- congruent with the goals of assuring quality within UKCP Member Organisations;
- a demonstrably effective means of ensuring control of quality in relation to core and section standards to MOs and Trainings leading to registration;
- Transparent and accountable
- Capable of facilitating organisations in the review and development of their policy, criteria, practice and standards to ensure their goals – internal and external can be achieved and are aligned with UKCP policy and practice
- supportive of the work by the Hypno-Psychotherapy Section to review and develop Section criteria, policy and practice to address past difficulties and respond to the future needs of UKCP and the modality.

UKCP has agreed principles on which to base its Training Standards and policies to regulate them across all psychotherapy modalities. These principles and policies concern the Council's Training Standards Committee, the Sections' Training Standards Committees and Accreditation Committees and the individual Training Organisations which devise and run psychotherapy training courses leading to registration with the Council.

Basic Training Standards were established in 1993 and published as 'Training Requirements of UKCP'. A Regulatory Framework to integrate the Training Standards

with Training Outcomes was agreed in 2001 and published as **UKCP Training Standards: Policy and Principles**.

The UKCP's core documents set out:

- the Guiding Principles on which all psychotherapy training should be based;
- the Regulatory Framework which will ensure that standards and outcomes of training are enforced;
- the responsibilities of the various bodies involved;
- the basic Training Requirements.

These may be seen at appendix B to this report.

Introduction:

This report is structured to provide both an account of the Assessment visit to The National Register of Hypnotherapists and Psychotherapists (NRHP) and a presentation of the review of material provided by NRHP prior to the visit and that gained by the assessment team at the visit. The report provides specific conclusions that are identified as being:

- Requirements;
- Strong Recommendations;
- Recommendations;
- Advice and guidance

Requirements will have a date for completion and may also have a date at which their implementation will be assessed.

The report seeks where ever possible to clearly describe what criteria have been used in the assessment, where those criteria originate and the basis on which they have been applied. However, the parallel review of Hypno-Psychotherapy Section practice and standards may impact on this process in some areas – these will be identified clearly wherever possible.

QR Assessment Visit Report:

1. Visit Information:

1.1 Organisation Being Assessed:

National Register of Hypnotherapists and Psychotherapists (NRHP).

1.1.a UKCP Member Organisation Type:

NRHP is a UKCP Listing Organisation

1.2 Date of Assessment Visit:

05 June 2008

1.2 Location of Assessment:

The visit took place at the NRHP offices at 18 Carr Road, Nelson, Lancashire, BB9 7JS.

1.3 Administrative Address of Organisation (if different):

As above.

1.5 Assessment Team:

1.5.a Lead Assessor - Mike Bowen (UKCP Staff – Regulation and Standards Consultant);
1.5.b Second Assessor - Carmen Ablack (UKCP Chair of Training Standards / Standards Board)

2. Organisational Overview:

(Does the organisational structure ensure that the staff are appropriately accountable and interests and concerns can be taken seriously and are capable of being held within suitable frameworks?)

NRHP is a UKCP Listing Organisation. Listing Organisations function within the UKCP Framework to allow individual registrants to maintain their UKCP registration through an organisation other than the UKCP Training Organisation or Accrediting Organisation that first placed them on the Register. Although Listing Organisations are not entitled to put forward individuals for first registration, they have duties, responsibilities and operational functions in common with all of the Full Categories of UKCP Membership in terms of re-registering and periodic reaccreditation of their members.

Listing Organisations are therefore involved with the application of UKCP Core and Modality Section Standards for Education and Training, Ethics, Supervision and CPD. Listing Organisations are expected to have, operate (and evidence that operation) and develop effective procedures and practices to ensure that their UKCP Registrants continue to be fit to practise.

2.1 Management and Governance:

NRHP has a Board consisting of the following:

Sir Bill Connor – Chair

Andrew Waddington - Company Secretary

Jon Beilby –

John Trewhella

Jane Watson

Mrs A Plotel

Miss S Schofield

Present at the assessment: – Jon Beilby, Sir Bill Connor, Andrew Waddington, Julie Young, Jane Watson, Susan Dixon.

2.2 NRHP has a small Board of Directors (currently 7 Members) that is elected by the membership. The Board meets twice per year. The organisation is otherwise run by the staff and directors who act ad hoc to manage the day to day affairs.

2.3 The Board also works extensively by email, thereby supporting the staff and the directors most frequently involved (Andrew Waddington and Jon Beilby) in the operational management of NRHP.

2.4 In addition to the Board NRHP has an Ethics and Reconciliations Group. This is a rolling group of self selecting NRHP members who volunteer to act as required to address ethical issues that arise. NRHP's complaints process is structured to so that all fitness to practise matters are dealt with by the Board of Directors.

2.5 Members are able to communicate routinely through emails, letters and phone calls to the office and Board. In addition dialogue through letters to the NRHP newsletter allows members to communicate with the Board and one another in a 'public' forum.

2.6 NRHP reported that at the last Board 101 out 500 members voted. NRHP felt that this was reflective of their view that the majority of their membership was generally fairly uninvolved with the organisation. NRHP considered this to reflect that fact that while

distanced from the day to day affairs of the organisation, their members were concerned over events that they perceived as significant.

2.7 Directors (later supported by staff account) reported that the office received a fairly steady number of calls, though some of these were often related to matters that Directors and Staff considered were more appropriately directed toward UKCP (for example).

2.8 NRHP clarified that they understood NRHP to be a UKCP Listing Organisation. Jon Beilby offered his understanding of the functions of Listing Organisations within the UKCP framework. This matched UKCP's model closely.

2.9 Constitution: NRHP's constitutional documents had been made available to the assessors prior to the visit. The Memorandum and Articles of Association were also available to the UKCP Membership Committee as part of the NRHP submission. These documents were considered relatively straight forward, uncontentious and essentially fit for purpose for a UKCP Member Organisation. They clearly structure NRHP as a Not-for-Profit organisation.

2.10 Assessment: The primary responsibility for reviewing the management and governance arrangements for UKCP MOs in relation to UKCP's criteria for membership and current guidance on best practice lies with the UKCP Membership Committee. The assessment visit must, however, consider the impact of the management and governance of organisations on their capacity to adequately fulfil specific functions as a training, accrediting or listing body of UKCP and in respect of the effective application of Section standards.

2.10.a NRHP's governance and management structures are broadly in line with UKCP requirements and expectations.

2.10.b NRHP's documents would benefit from having all of NRHP's associations listed fully. This may help to locate the organisation within the wider frameworks and relationships that it interacts with, and serves to describe its relationships / engagements.

2.10.c Ethics: NRHP does not currently have a standing ethics committee. This has been strongly advised by UKCP since 2002. Similarly there are potential difficulties / risks associated with the current role of the Board in relation to fitness to practise complaints against members. The positioning and role of Ethics within NRHP is less clearly defined than it could be.

2.10.c.i Code of Ethics: NRHP's Code of Ethics is combined with the 'Code of Clinical Practice' in a single document, with no delineation between the two codes. The assessors consider this unhelpful, and believe it would be preferable to have either 2 documents or 2 very clearly defined sections within the one document so as to distinguish between the Code of Ethics (which must follow UKCP's Minimum Ethical Requirements for Member Organisations, and elaborate on each of the clauses in a manner consistent with Hypno Psychotherapy) and the Code of Practice (which should be congruent with UKCP central and modality section standards for practice). The relationship of NRHP's codes to UKCP's and any other relevant frameworks should be clearly identified / described within the revised document (for example as members of the EAP, the MO may wish to address this in a little more detail).

2.10.d Complaints: Full details of NRHP's complaints procedure were not available to assessors prior to or at the assessment visit. The Complaints Procedure information document provided contains a number of issues that need to be corrected immediately. For example, paragraph 1 on page 2 refers to the grounds on which a UKCP CFAP

appeal may be submitted- these are incorrect. Later in this paragraph there is a statement relating to costs that is both unclear and potentially problematic. The final paragraph of the final section on page two is also incorrect – there is no scope for CFAP appeals in relation to matters of discipline / grievance – the CAFAP is only open to applications arising from fitness to practise proceedings. The assessors view was that the two processes of complaints and of discipline / grievance should be clearly separated and presented in distinct documents.

2.10.e The assessors, although conscious of the UKCP's intention to put in place a new, central process for Fitness to Practise complaints in relation to UKCP Registrants, were concerned that NRHP review their process as a matter of urgency and seek appropriate advice on revising / updating this document.

2.10.f NRHP's rules describe a right to decline admittance without offering reasons. The assessors consider such a right to be potentially problematic and undesirable. It is important that organisations have and consistently operate (and can provide evidence of that operation) rules and procedures for entry and exit to membership, registration with UKCP and other positions within the organisation that are transparent, equitable and accountable. Describing an expectation that reasons will be given for decisions is consistent with the requirement for transparency and represents good practice.

3. Review of Accreditation Procedures: *(including guidance for staff and officers, documentation, appeals, administrative infrastructure)*

3.1 Office / Administrative Space:

3.1.a NRHP moved into the offices at which the visit took place approximately 3 months ago. There are two offices on the first floor of a house converted for office use. The downstairs offices in the house are used by an organisation working with equalities and diversity issues. The building is located on a street on which the majority of the houses have been similarly converted into offices, predominantly firms of solicitors and accountants.

3.1.b The offices were well equipped with filing cabinets, shelves and desks. NRHP has 2 part time staff members who work from the offices. Jon Beilby and Andrew Waddington also regularly attend the offices and work from them.

3.1.c The space was clearly newly acquired but equally clearly was well used and efficiently organised, with well labelled files and notice boards arranged with up to date items posted on them. The assessors were informed that NRHP was waiting for their new landlord to redecorate the offices in accordance with their lease agreement.

3.2 Documentation:

3.2.a NRHP provided further documents to the assessors at the visit that related to their practice and procedures around renewal of UKCP Registration, re-accreditation and audit. Copies of these are to be forwarded electronically to Mike Bowen at the UKCP office.

3.2.b NRHP has clear criteria for its categories of membership, including UKCP Registered Members. There are also requirements relating to annual renewal of registration and periodic (5 yearly) re-accreditation and 'audit' by NRHP. The assessors noted that NRHP refer to this 5 yearly process of audit and re-accreditation as their 'Quinquennial Review' [of individuals]. The NRHP officers and staff appreciated that this was somewhat confusing given the use of the term quinquennial review in the UKCP as a

whole. It was agreed that the NRHP process would be called a 5-yearly re-accreditation instead. This terminology would be consistent with the majority of UKCP's MOs.

3.2.c Each year 20% of NRHP members are required to submit detailed information relating to how they have continued to meet NRHP requirements for Registration and CPD over the past 5 years. NRHP's standards for CPD appeared to be congruent with UKCP and EAP requirements and were explicitly related to both.

3.2.d The discussion provided the assessors with further information about the records held by NRHP in relation to individual members and specifically UKCP Registered members. Each member's files would contain the information submitted for their first application, each annual renewal of UKCP Registration and all subsequent reaccreditation / audit processes (NRHP's 'Quinquennial Reviews' of individuals).

3.2.e NRHP requires new members to provide evidence of supervision, indemnity insurance, previous registration with UKCP through a Training or Accrediting organisation and evidence of the qualifications or portfolio that led to that initial registration.

3.2.f NRHP has membership categories for individuals still in training at UKCP Training MOs (primarily the NCHP) and provides criteria and standards as well as an FtP procedure for such members.

3.3 Administration:

3.3.a NRHP has 2 part time administrative staff - Julie Young and Susan Dixon. Julie joined NRHP in 1989 in January. NRHP started in 1985, so Julie has been with the organisation from close to its inception. Until very recently NRHP and NCHP shared administrative space and personnel, so Julie has worked for both NCHP and NRHP in a range of administrative roles.

3.3.b Susan joined NRHP in May 1996 initially to support with general administrative duties. Both Julie and Susan are involved in UKCP Registration renewals process and NRHP's 5 yearly re-accreditation of individuals. They demonstrated both clear understandings of the processes, and a good knowledge of the organisations requirements and standards.

3.3.c Julie and Susan were able to provide the assessors with copies of procedural guidance documents for their work. The duties sheet provided over arching outline information, but there were additional, more detailed documents describing specific tasks / activities in greater depth.

3.3.d Julie noted that staff had on occasion taken Board minutes, though this was not usually part of their role – all Board Minutes were filed by staff at the office. AGM minutes were circulated to all members by Julie and Susan through the proceeding news letter.

3.3.e Julie and Susan described their role in relation to responding to and forwarding enquiries from members on a wide range of issues, often on matter that were not obviously or directly related to NRHP per se but that members never the less felt inclined to bring to NRHP in the first instance. They identified their primary contact at UKCP as being Valerie Honore.

3.3.f Website: it was noted that Julie manages the website in terms of day to day update and content changes. Technical issues are addressed in house or by the husband of a member who is a web designer.

3.3.g Assessment:

3.3.g.1 NRHP benefits from policy and guidance documents and physical infrastructure for administration that are generally very good. This is further strengthened by outstanding staff who have been with the organisation for a long time.

3.3.g.2 The assessors were impressed with elements of the documentation and with the knowledge and competence of the staff, who spoke clearly and confidently about their role in the organisation. The NRHP was also clearly aware of the importance of the 2 staff members to the organisation, which was positive to observe.

3.3.g.3 The Administrative aspects of NRHP offer some solid examples of good practice for listing organisations and easily meet the UKCP's requirements and expectations.

3.4 Discussion with Accreditation Officers / Staff:

The organisation clearly has many good practices in relation to communication with its members. Discussion was had regarding creating more transparent, accountable and consistent (and supporting evidence of their operation in practice) routes to communication. One example cited for better communication protocols is for NRHP to have a page on website/handout tagged up to address headings such as Routes to communication and Data Management information.

3.4.a Audit: It seemed that terminology for reviews and audit were being confused in relation to CPD. The assessors clarified that all members should be submitting a CPD summary document as part of their 5 yearly re-accreditation process. Auditing of a percentage of members was seen as additional to this process. The assessors noted that audits (as the term is used in UKCP) are by nature a random percentage. It was acknowledged that other forms of audit exist, however to maintain consistency in the system, this form of audit is what is currently understood.

3.4.b Member / UKCP Registrant Records: Records are well maintained and the administrative staff were clear and cogent on how they deal with these. The organisation has a directory, the assessors would like to see a dedicated list of all NRHP UKCP registrants listed under the heading of UKCP Hypno Psychotherapist within the directory. This speaks further to transparency and access to information issues for trainee members and members of the public. It is appreciated that NRHP have some members who do not wish to appear in the directory, However some form of membership list of all UKCP registrant members of NRHP should be available from the office and / or website

3.5 Assessment:

3.5.a. The Assessors were particularly impressed by the clarity, experience and knowledge of the staff and by the easily accessible documentation systems they have created.

3.5.b It is clear a lot of hard work and thought has gone into the administrative support of the organisation. It may be that consideration needs to be given further to how members with impairment disabilities would be supported by the systems.

3.5.c The registration as a Data Controller is seen as good standard practice for all UKCP MOs and it is positive that NRHP is registered with the Office of the Information Commissioner.

3.5.d Clarity on terminology and consistency in updating all documentation is needed. The term %-yearly re-accreditation should be used for that process with UKCP Registrants

3.5.e All formal documentation should have the Logo of the UKCP on it ; e.g. directory, forms, codes of practice and other handbooks etc.

4. Discussion with Registrants:

4.1.a NRHP provided the assessors with a full list of Members and UKCP Registrant members and a list of members who had expressed a willingness to be contacted by Assessors in relation to the QR process. In addition to this, one NRHP member attended at the office on the day of the assessment and met with assessors.

4.1.b The member concerned (PS) was currently completing his final dissertation for NCHP's training course, so was at the time of the assessment in the category of Associate 3 membership of NRHP.

4.1.c PS reported that his experience of NRHP was that the organisation was very supportive of members in all categories, with staff and officers readily accessible either via the phone or email, to respond to a range of enquiries and to offer a variety of information, support and guidance.

4.1.d PS explained that NRHP had facilitated and continued to support and number of supervision groups and member networks that he had found very important in developing his practice as a trainee Hypno-Psychotherapist.

4.1.e NRHP's support for trainee members was particularly highlighted.

4.1.f **Assessment:** The limited access to registrants (which NRHP had taken some effort to achieve in the first place and had sought to mitigate by providing assessors with a list of telephone contacts for registrants who were unable to attend on the day but from whom NRHP had obtained permission to provide assessors with contact details so they could be contacted later if desired) restricted the scope of this aspect of the assessment. It appeared that the organisation had achieved some level of registrant engagement and communication as evidenced by the comments of the individual who attended.

4.1.f.i As a wider observation the assessors were concerned that NRHP should seek to ensure that attention is paid to the impact of their incorporation (whether by 'merger' or 'transfer') of NHPC's registrants / members on the organisation's culture, dynamics and communication. Further developing the routes through which Registrants can genuinely engage with and contribute to NRHP could facilitate the organisation's capacity to demonstrate that they are effectively working for their whole membership.

5. Conclusions: - Requirements, Recommendations and Guidance

The assessors conclusions are framed in terms of:

Requirements: actions that the training organisation must take or issues that must be addressed. A timescale within which ameliorative action must be concluded in respect of each requirement will be specified. Effectively implementing actions to address requirements identified at QR is mandatory for UKCP membership to be maintained.

Recommendations: recommendations will either be '*strong recommendations*' or '*recommendations*'. Strong Recommendations relate to areas of current development within UKCP / the UKCP Section that are likely to create a future requirement or are directly concerned with current thinking on best practice on important aspects of trainings. Recommendations will normally relate to UKCP's understanding of best practice across organisations within the regulatory sector. Indications of time limits may be given, where relevant. It is considered good practice for organisations to take reasonable steps to review and assess recommendations arising from QR assessments and to be able to demonstrate whether and how they have sought to address them at the next review.

Advice and Guidance: is offered as feedback by assessors with the aim of supporting organisations to develop their trainings. This may relate to advice about possible ways of augmenting or enhancing the experience of trainees, preserving a special characteristic of an organisation, or developing the organisation as a whole, for example. Guidance is intended to support member organisations in their continued development.

Requirements:

5.1.a Code of Ethics: NRHP must review and revise their document entitled Code of Ethics and Clinical Practise, with specific regard to seeking to clearly distinguish between their Code of Ethics and Code of Practise, and to ensure that clauses in each code are aligned with UKCP Core requirements and Section modality guidance. *Time scale:* This should be completed within **6 months** and submitted to both the Assessors and the UKCP Ethics Committee (through the Standards Board) for review.

5.1.b Criteria and Appeals: NRHP has criteria for initial membership, renewal of membership and 5 yearly re-accreditation / audit and maintains good records in relation to the processes relating to them. However, the current documentation and presentation of these criteria does not render them as clearly accessible as they ought to be. Either separate documents or clearly labelled subsections within a single document should be created to communicate NRHP's requirements and procedures of reassessing individuals in relation to these, together with a clear process through which appeals will be addressed. Similarly the processes and procedures for considering such applications and assessing individuals in respect of these standards should be clearly defined and readily available. *Time scale:* appropriate revised or new documentation addressing this requirement should be provided to assessors (through the Standards Board) within **12 months**.

5.1.c External Moderator: An external moderator must be appointed through a transparent and open selection process. The external moderator should be a very experienced UKCP practitioner, trainer and supervisor (or equivalent) from another psychotherapeutic approach with some substantial experience of working in / with psychotherapeutic organisation(s). Their main role is to provide advice, guidance and support to the organisation and thus its members on the development and growth of the organisation. Please note External Moderators **must not** be involved in any grievance, discipline or complaints procedures as members of a panel or at a level of decision making in any such processes.

5.1.d NRHP need to pay greater attendance to the development and implementation of clear policies, procedures and practices on Diversity and Equalities throughout their organisation and its work, This must include the creation of an advisory group of some kind or a committee dedicated to supporting the extension of diversity and equalities understanding and application in the work and ethos of the organisation and should pay some regard to the wider world of psychotherapy and hypno-psychotherapy with regard to these essential areas of growth and development.

5.1.e As there has been a recent growth in membership numbers due to the co-joining of two organisations (NRHP and NHPC) into one under the name NRHP, the Assessors would like clear written protocols of how NRHP and NHPC are managing / will continue to manage this process to ensure that there is an equality of representation at all levels for

both sets of members, This would include clear inclusion of members from both the original organisations at all levels, but particularly UKCP Registrants and Trainees on all committees and working groups named in this document.

5.1.f NRHP has some very clear and well administrated policies and practice guidance relating to their record keeping, which the assessors wished to recognise and express their appreciation of. The organisations work in this are would be further strengthened by the introduction of portfolios for evidencing the records of UKCP Registrants. These would include the following:

- Copies of the complete, original applications for membership – this should include:
 - copies of the confirmation from the MO that originally placed the person on the UKCP Register and
 - UKCP confirmation of first registration,
 - together with confirmation from the MO that first registered the individual of their good standing and
 - freedom from outstanding complaints.
- Details of assessment criteria and assessors record sheets for each application and the outcome (this is especially relevant for unsuccessful applicants who might seek to challenge NRHP).
- Logs for annual renewal of registration submissions / returns
- re-accreditation assessment sheets and full submission
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NRHP therefore need to have written, published criteria for evidencing for re-accreditation.

5.1.g Further to 5.1.f, NRHP should develop an appropriate Appeals procedure for applicants and members being re-accredited or seeking renewal – this should incorporate clear processes and support the practice of providing not only the decision from such a process but clear reasons for the decisions.

5.1.h NRHP should also seek to produce and publish specific criteria documents for each of their membership categories.

5.1.i Full details on Professional Conduct; Grievance Procedures and Disciplinary Action are required and should be readily available – preferably on the website for download.

5.2 Recommendations:

5.2.a Although NRHP's record keeping was to a very good standard, the assessors considered that it could be readily improved further though the addition of a pro-forma for file front-sheets for Registrant / Member Files. This sheet would provide a straightforward location for logging each item in the file, when received, who checked / entered items etc. This would both enhance the QA and QC for the system, and facilitate internal audit and external assessment

5.2.b CPD Trainings need to have clearly set out learning outcomes and objectives which are published. The Assessors recommend that a written evidenced process for offering/ bidding and accepting CPD courses is created. This should include reference to the scope and procedure for appeals by CPD trainings that are assessed but which fail to meet NRHP criteria.

5.2.c NRHP are recommended to produce a document that contains clear descriptions of relationships and affiliations with UKCP and other bodies. This content should then be

cross referenced with or inserted into other documents, particularly those provided to members

5.2.d Clear descriptions of the relationships with the other MOs of the section should be written into the documentation given to members. This is particularly important in relation to Ethics procedures and practices as they affect trainee members; that is documentation must make clear what (if any) responsibility NRHP has and who the trainee member should approach if they have any questions or concerns. This person should be a named officer.

5.2.e There needs to be lay representation on the main committees of the organisation

5.3 Guidance:

5.3.a NRHP were left with the consideration of changing their status to an accrediting organisation within the UKCP framework. The Assessors were clear that they have the capacity to put the appropriate administrative functions and documentation in place to achieve this.

5.3.b The Assessors considered this would enrich the breath and depth of the organisation and thus would also support the development of the Section and UKCP overall. It would also serve to strengthen the organisations' capacity to act independently from the training organisations in the Section. The assessors acknowledged that there is a move generally in UKCP to Accrediting organisations and away from Listing.

5.4 Conclusion: Pass, Defer, or Fail

5.4.a Each QR process carries both the intention to assure quality within and across sections and at the level of UKCP standards generally. QR's are intended to offer constructive feedback and an external perspective that may be of assistance to organisations in their development and maintenance of high standards.

5.4.b Inevitably there is also a quality control aspect to the process. This means that assessors must also arrive at a decision in relation to whether an organisation continues to meet UKCP and relevant modality standards for the training it delivers. In particular assessors must consider whether the training as assessed is capable of ensuring that graduate are fit to practice as psychotherapists and therefore to be placed on the UKCP's National Register.

5.4.c There are 3 possible outcomes from a QR visit:

5.4.c.i **Pass:** The organisation continues to meet UKCP and relevant modality standards to an acceptable level. 'Passed' organisations may be given recommendations and guidance. Where an organisation is determined to have 'Passed' with requirements this will be made clear. Organisations passed are unlikely to have been assessed as having either a large number of specific requirements or any requirements that relate to significant issues of concern

5.4.c.ii **Defer:** the organisation meets many of the criteria and standards of the UKCP and relevant modality, but does not meet either: significant criteria / standards; or a sufficient number of other criteria / standards so as to create a basis for the assessors to defer the conclusion of the QR process. To award a deferral, assessors must also consider that there is scope for the organisation to be returned to a position of being able to achieve a pass within a reasonable time frame (usually not more than 18 months). Where the issues of concern identified by assessors relate to the potential fitness to practice of trainees / graduates assessors may define limits on the organisation in terms of

putting graduates forward for registration until relevant remedial actions have been completed, evidenced and where relevant reassessed.

5.4.c.iii **Fail:** the organisation does not meet a number of significant core and modality criteria and standards. Normally assessors must consider that the organisation is unlikely to be able to complete adequate corrective action to address the identified issues within a reasonable time frame to fail an organisation. An organisation may also be failed if assessors consider this the only appropriate means of securing public and trainees safety and preserving the UKCP's standards and reputation.

Decision:

Pass - with some very specific requirements and recommendations. Not concerned about the integrity of their re-accreditation processes per se; but would like to see an overall raising of standards of transparency and inclusion of all their members. The Assessor wish to emphasize here the importance of issues of diversity, equalities, representation of membership, fair representation processes for all boards and committees.