



CCP Review Group Minutes

Meeting Date: Wednesday 25 June 2014

Time: 12.30 to 15:30

Location: Room 1, UKCP

Present: David Pink (DP) – Chair
 Sally Forster (SF)
 Haya Oakley (HO)
 Sian Ellis (SE)
 Brian Linfield (BL)
 Catherine Freeman (CF)
 Debbie Livingstone (DL) – Dial in until 2pm
 Sunita Thakore (ST)
 Samantha Lind (SL)

Apologies: Kate Waters (KW)
 Fiona Biddle (FB)

Minutes: Samantha Lind (SL)

Item	
1.	<p>Welcomes and Apologies</p> <p>We need to think about the make up of this group and the importance of having equal representation from the people and colleges engaged. We want the right people to participate to give credibility to the work we are doing. Have contacted the chair of the relevant college that has not yet contributed to advise that we may need a replacement, or at least a confirmation of future attendance. View of one college that has not attended is extremely important and is one of the groups that is at risk of complaints due to its client group.</p> <p>The group are in support of DP contacting the college to seek a statement on where they stand with the CCP and their input on the decisions being reached by the group.</p> <p>AP: DP to contact CFCST to determine how they will be represented moving forward.</p>

<p>2.</p>	<p>Review of Minutes of 11 June 2014</p> <p>Discussion about the format of minutes. Group agreed that the minutes ought not to be attributed to individuals, however should encompass the spirit of discussion and make it clear which arguments were submitted and what was taken into consideration.</p> <p>AP: SL to review previous minutes and amend as necessary.</p> <p><u>Actions from 11 June 2014</u></p> <p>2.1 Minutes have been amended as necessary</p> <p>2.2 E-mail has been sent to the colleges seeking a response to the consultation. Have received two so far, each saying that they have nothing to add to the current CCP.</p> <p>2.3 Bundle of unpublished responses has been sent to SE and SF for review. Currently in progress.</p> <p>2.4 Summary report has been updated with the correct figures and will be published online without the discussion points for public view.</p> <p>2.5 All responses have been published that have provided consent to do so.</p> <p>2.6 Ethical Principles and Code of Conduct has been checked and will be discussed at a later point.</p> <p>2.7 Report is a work in progress.</p> <p>2.8 Proposed timetable has been produced and will be reviewed and confirmed by the group.</p> <p>AP: SL/SK to publish the CCP Summary report without the discussion points listed. Need to make clear that all evidence submitted is being considered, not just the quotes in the document.</p> <p>AP: Add questions to the minutes for each discussion to allow to be read standalone.</p> <p>AP: SL to update the report with decisions, recommendations, and considerations for each question addressed.</p>
<p>3</p>	<p>Timetable</p> <p>We need to communicate to the membership that the timetable has varied and will extend past July. It is important that the membership understand why the timetable has been extended and that the group is progressing well. Decisions reached so far will not be communicated, but we should indicate how far we have progressed. Extension of timetable is because we are doing our job in a thorough way and proper process is taking place.</p> <p>AP: SL to update timetable as necessary.</p>
<p>4.1</p> <p>4.1.1</p>	<p>Question Two: Are the five categories used to describe possible impairment of fitness to practise the right ones?</p> <p>After assessing the EPCOPC it appears that not all five categories are covered by the current EPCOPC as it stands. Important to recall that the five categories are to be considered as a means for the complainant to reach the complaints system – per the decision of the previous meeting, whether a complaint will be accepted will still be judged against the EPCOPC. The group agreed in principle that the gateway to the CCP is the EPCOPC and have discussed whether it should be an exhaustive list of offences or a guide of principled and expected behaviours. The Code should be a working document that can be amended to close identified gaps through the Ethics Committee.</p> <p>- 'Misconduct' appears to be covered sufficiently;</p>

4.1.2	<ul style="list-style-type: none"> - 'Deficient Professional Performance' is linked to certain behaviours but it is not detailed. The burden of proof is very high for this category. <ul style="list-style-type: none"> o It could be removed, however many members felt it was a necessary avenue for the public to find a way into the complaints system. o Concerns were raised about the ability to measure competence without a definitive standard of competence. o Important that the public have easy access to a number of different ways that that they can bring a complaint into the CCP. o All agreed that wording of the clause is perhaps not the right one – 'deficient' casts a negative light. Consideration of whether an adjective is necessary – should it be open to discuss professional competence, or is it necessary to make it clear that it is only deficient performance that is considered. Should it be about performance or competence? <p>Recommendation: To be changed to 'serious professional incompetence'</p>
4.1.3	<ul style="list-style-type: none"> - 'Conviction or caution in the UK for a criminal offence' – It is mentioned in the EPCOPC but it is still necessary to remain as a category in and of itself; however it needs to be signposted and made clear what the relevance is. There is a slight issue because the EPCOPC goes on to describe the process that will be followed with these declarations that will need to be removed so that it does not conflict with the CCP. <p>Recommendation: The process should be removed from the EPCOPC and it should be made clear that it will be referred to the CCP to be screened and considered in relation to any likely impact on their professional conduct. The CCP should make it clear that any conviction needs to be relevant to their professional practise.</p>
4.1.4	<ul style="list-style-type: none"> - Physical or mental health – is covered in the EPCOPC but should stay as a category. <p>Recommendation: The process should be removed from the EPCOPC and it should be made clear that it will be referred to the CCP to be screened and considered in relation to any likely impact on their professional conduct. The CCP should make it clear that any physical or mental health issue needs to be relevant to their professional practise.</p>
4.1.5	<ul style="list-style-type: none"> - Decision by another professional body in the UK responsible for the regulation of a health, social care, or other relevant profession to the effect that the therapist's FTP is impaired – this is not covered sufficiently and needs to remain in the CCP. <ul style="list-style-type: none"> o Consideration about whether this should be rolled in together with the criminal conviction category in order to simplify the avenues to complain. There is a different test of relevance so perhaps best to keep separate. <p>Decision: The five categories are necessary signposts that will direct complainants through the system and should remain in the CCP.</p> <p>Recommendation: All will remain except the second category will be amended.</p>
4.2	<p>Question Nine: What other avenues should UKCP use to lodge a formal complaint?</p> <ul style="list-style-type: none"> - The CPJA view is that any avenue that can be made available for a complainant to contact UKCP should be used; - There is recent case law that suggests that e-mail can be classed as a signed document; - We shouldn't disadvantage people in a discriminatory fashion – those who cannot write

	<p>should not be prevented from lodging a complaint;</p> <ul style="list-style-type: none"> - We expect that in order to progress formal complaints that we receive written allegations that can be passed on to the therapist with the consent of the complainant to do so; - The Complaint form is appreciated but not required, as long as the complaint is received in writing. <p>Decision: For a formal complaint to proceed it must be received in writing. No other avenues are necessary.</p> <p>Recommendation: If someone is unable to write a complaint they can be referred to advocate agencies where necessary.</p> <p>4.3 <i>Should we accept anonymous allegations?</i></p> <ul style="list-style-type: none"> - Not in principle, but a complaint should be able to be taken forward in extreme circumstances. We cannot deal with an unsigned or anonymous allegation; - If the allegations pass certain thresholds of seriousness and can be verified by other independent sources then we can potentially look at it; - Regulation of Healthcare Professionals – ‘Anonymous complaints may provide the impetus for a proper investigation to gather evidence about a practitioner’s fitness to practise. However, such complaints should never be the sole basis for a referral to a committee or panel for hearing, whatever the threshold set by the regulator for referral’. - Current position of the CCP: 6.5 – <i>Where UKCP receives an anonymous notification of a concern or complaint, a PCO may act as the complainant if he thinks there is sufficient information to enable him to proceed and he thinks it is in the public interest that he should do so’.</i> <p>Decision: Anonymous complaints will only be considered as a trigger for investigation in the most extreme circumstances and it must be apparent from the allegation that it is independently verifiable.</p> <p>4.4 <i>Is the complaints form fit for purpose?</i></p> <ul style="list-style-type: none"> - Per the discussion about Fitness to Practise the title needs to change, but as an information-gathering tool it appears fit for purpose. <p>AP: SK to amend the complaints form as necessary once the review has finished.</p> <p>Decision: Yes.</p> <p>4.5 <i>Should we have a policy obliging psychotherapists to report issues about other therapists?</i></p> <ul style="list-style-type: none"> - Although there is currently a clause in the EPCOPC that obliges the therapist to notify UKCP if they become aware of unethical behaviour, there is nothing that protects the therapist from issues that may arise, such as disciplinary proceedings in the workplace or breaches of confidentiality. - This is a matter for the Ethics Committee to consider once they have been reformed. <p>Decision: Yes. UKCP must have something in place that protects people from potential breaches of multiple Codes of Ethics if they blow the whistle.</p>
5.	<p>Finalise Actions / AOB</p> <p>AP: DP to contact CFCST to determine how they will be represented moving forward.</p> <p>AP: SL to review previous minutes and amend as necessary.</p>

	<p>AP: SL/SK to publish the CCP Summary report without the discussion points listed. Need to make clear that all evidence submitted is being considered, not just the quotes in the document.</p> <p>AP: Add questions to the minutes for each discussion to allow to be read standalone.</p> <p>AP: SL to update the report with decisions, recommendations, and considerations for each question addressed.</p> <p>AP: SL to update timetable as necessary.</p> <p>AP: SK to amend the complaints form as necessary once the review has finished.</p>
6.	<p>Date of next meeting Wednesday 9 July 2014</p>