

UKCP AUDIT REPORT

Annual Random Audit 2017

1. INTRODUCTION AND OVERVIEW

As part of our quality assurance processes, UKCP undertakes audits of individual registrants. This is not only to ensure the integrity of the register through quality assurance, but also to allow UKCP to continue its obligation as a charity formed for the purpose of protecting the public.

This report is based on findings from UKCP's annual random audit of 3% of registrants in 2017 who have not been audited in the previous 5 years, and also includes any registrants who deferred their audit in 2016.

Those registrants participating in the 2017 audit who were deferred from last year were given a revised 2017 deadline and advised that their membership status would be at risk if they did not submit.

All registrants participating in the audit received Audit Guidance Notes advising them to submit evidence of the following:

- Qualifications
- Supervision
- Continuing Professional Development
- Professional Indemnity Insurance

2. FINDINGS

2.1 Background:

The auditees for 2017 were divided up alphabetically in 8 batches of approximately 26 registrants each and a separate batch for the 11 deferred registrants from the 2016 audit. They were notified via email at specific dates throughout the year (avoiding major holiday periods and summer holidays). Registrants were given approximately 5-6 weeks' notice to submit.

The following figures represent the 218 registrants participating in the 2017 audit process:

- 207 randomly selected UKCP registrants
- 11 registrants deferred from the 3% annual audit of 2016

Of the 218 registrants participating, 191 completed and passed the audit. 1 audit is still incomplete and outstanding.

More detailed information on this specific statistic can be found in section 2.1.6 below.

Year	Number participating*	Submissions received
2017	218	191
2016	211	181
2015	203	174
2014	233	209

***NB:** The number participating includes 3% of registrants at the beginning of the audit calendar year plus any deferred from previous audits.

2.1.1 Method of Submission:

The 2015 audit marked the first time registrants were sent audit documentation via email as default (unless a valid email address was not held within our records). Our preference to receive completed submissions via email was clearly stated in the supplied Audit Guidance Notes. The 2016 audit marked the first time registrants were requested specifically to submit audit documentation via email as default, therefore making it the first fully electronic audit. This meant a huge reduction in postal applications, resulting in a more efficient and cost-effective process for both UKCP and its registrants.

While 2017's figures indicate a drop in percentages, in actuality there was only a difference of 4 people posting their documents. This could be an indicator of preference or other mitigating factor (such as access to a copy machine but not a scanner or someone's computer having crashed).

Year	Total Submissions Received	Email	Post	Email & Post
2017	191	172 (90%)	19 (8%)	4 (2%)
2016	181	176 (97%)	5 (3%)	Not recorded
2015	174	118 (68%)	56 (32%)	Not recorded

2.1.2 Submissions received on time:

Of the submissions received, i.e. excluding those who were withdrawn, deferred or who resigned registration, the following statistics indicate when submissions were received.

Year	Total submissions received	Received by original deadline	Received within 1 month of deadline
2017	191	145 (76%)	36 (19%)
2016	181	146 (81%)	21 (12%)
2015	174	132 (76%)	25 (14%)
2014	209	72%	8%

While this shows a 5% drop in on time arrivals compared with 2016, there is a 7% increase in those received within a month of the original deadline, which indicates an overall increase this year of 2% in all submissions being received within a month (or less) of the original due date.

We believe that the ‘batch’ method (monthly batches of auditees) of auditees being notified of audit continues to provide better and more immediate support to registrants, which allows for a continued overall improvement in submissions being received within (normally) 5 to 8 weeks after notification.

2.1.3 Late submissions:

While there were more reminders sent of missed deadlines or extension deadlines, it’s important to note that the overall number of submissions completed and received within a month of the original deadline has increased by 2% over the past few years.

Year	Total participating	Submissions received	1 week reminder of upcoming (original) deadline	Reminder of missed deadline or extension
2017	218	191 (88%)	134	28
2016	211	181 (86%)	113	19
2015	203	174 (86%)	(not part of the process at the time)	19
2014	233	209 (90%)	(not part of the process at the time)	28

Reasons given for delays or extension requests (but not deferment request) include:

- Auditee is away during the audit period/deadline
- Auditee’s supervisor is away during the audit period/deadline
- Medical or maternity
- House move / documents in storage
- Sabbatical
- Bereavement
- Too busy at work at present
- Auditee did not receive initial notification

2.1.4 Extensions:

We would prefer an extension request to ‘chasing’ missing auditees, as it means our internal deadlines and resources are better managed. As a result, we offered the following number of extensions to those who requested it:

- 31 in 2017
- 35 in 2016
- 41 in 2015

- 36 in 2014 (who all had the same deadline of 31 July 2014)

Analysis of the extension requests highlights that certain time periods (i.e. the lead up to Easter holiday period, summer breaks, and other half term holidays – highlighted in pink) can generate a higher number of extension requests, which also ties into the late submissions. We believe the number of requests has dropped generally over the past few years due to careful consideration of the potential holiday periods.

Batch	2017 Deadline	Extension requested	2016 Deadline	Extension requested	2015 Deadline	Extension requested
1	17/03/17	5	11/03/16	4	06/03/15	2
2	24/03/17	3	18/03/16	7	27/03/15	6
3	31/03/17	7	29/04/16	4	01/05/15	7
4	12/05/17	3	13/05/16	1	15/05/15	5
5	02/06/17	6	03/06/16	1	05/06/15	3
6	23/06/17	2	24/06/16	2	26/06/15	4
7	07/07/17	0	15/07/16	7	17/07/15	4
deferred from prior	21/07/17	0	07/10/16	1	30/06/15	1
8	21/07/17	5	07/10/16	8	06/10/15	6
9	n/a	--	28/10/16	1	27/10/15	3

2.1.5 Submission quality:

A number of registrants were contacted upon the first review of their submission because they had not provided all of the requested documents or because their submission information was unclear:

Year	Total submissions received	Further information requested
2017	191	44 (23%)
2016	181	56 (31%)
2015	174	56 (31%)
2014	209	46 (22%)
2013	197	78 (40%)

Continued clarification and streamlining of the Audit Guidance Notes has ensured improved submission quality over the past 5 years.

More details regarding these figures can be found in Sections 2.2 – 2.6 below.

2.1.6 Audit completion:

Some of those registrants who were audited required feedback on their CPD, supervision, insurance, client hours or client groups to ensure they were meeting UKCP requirements.

Year	Total submissions received	Required feedback	Provided feedback on the Child Proficiency Marker
2017	191	22	4
2016	181	30	6
2015	174	23	2
2014	209	20	--

Of the 27 who have not passed the audit in 2017:

- 3 were withdrawn from the audit due to being new to the register (ie accredited within the last year).
- 2 were withdrawn from the audit due to medical reasons.
- 11 were deferred to 2018 due to the following: maternity leave, full time study, ill health, medical reasons, or bereavement.
NB: Dates will be set for their 2018 audit, with emails being sent to them in early February with an autumn 2018 deadline.
- 1 has not yet submitted for audit, but has been given an extended deadline.
- 4 did not submit audit documents, which is considered a failure to meet audit requirements. All 4 were sent to the UKCP Membership Committee for decision on whether to remove them from the UKCP register. It was decided that all 4 will be removed from the Register.
- 6 were withdrawn from the audit due to having resigned or retired.
NB: The UKCP Membership Committee was notified of all registrants who resigned or retired from the register as a result of audit notification. A membership category for those who are retiring or winding down has been proposed.

NB: The following statistics have been tracked in this and previous years in relation to the audit:

Year	Resigned registration	Retired from the Register	Removed from the Register for not submitting	Total who left the Register
2017	4	2	4*	10
2016	10	3	--	13
2015	5	10	--	15
2014	4	10	--	14
2013	4	1	--	5

*This is a new process tracked separately from previous years.

NB: Normally any registrants who have resigned or allowed their UKCP registration to lapse since they were

selected for audit will not be able to renew their UKCP registration until they have submitted audit documents and completed the audit process.

2.2 Qualifications:

Most audit submissions contained evidence of post graduate certificates and psychotherapy-specific training and short courses, and a few included 1st degree certificates.

A very small number included a CV with evidence (including correspondence) of graduation or accreditation from a UKCP OM rather than a certificate of qualification.

12 registrants did not initially provide qualifications, and it was necessary to request additional information or evidence. Reasons for not supplying qualifications included the following:

- The auditee having moved and misplaced documents.
- The auditee qualified many years ago and misplaced documents.
- The auditee qualified long enough ago that there was no qualification or letter confirming graduation or accreditation.
- The auditee assumes that this requirement does not apply to them. Normally their thinking is that this information was supplied to UKCP when they originally registered with UKCP.

2.3 Client Hours:

The 2017 audit is the third time where we have collected information on client hours.

Previously there was confusion with auditees providing various information, including the following forms of client/clinical hours:

- Clinical hours seeing supervisees
- Client assessment hours
- Private clients
- Clients via employment (such as NHS or etc.)
- Individual client hours
- Group clinical hours

We have clarified our form and guidance notes to request the following average annual client information between January and December 2017:

- client hours via private practice
- client hours via employment (such as NHS or etc.)

8 registrants did not initially provide their client hours or it was unclear what they were providing, and it was necessary to request additional information (vs 10 registrants last year). 1 member was provided feedback regarding breaks in practice.

Our members undertake a wide range of clinical hours throughout the year:

Type and amount of client practice	Number of hours
Lowest average in private practice	10
Lowest average in employed practice	9
Highest average in private practice	1344
Highest average in employed practice	2400
Lowest total combined hours by one individual	12
Highest total combined hours by one individual	2460

NB: These totals did not include a registrant who was taking time out from working with clients, but who did continue to provide occasional supervision.

In 2016 the lowest average client hours reported at 58 hours and the highest at 1680 hours.

2.4 Supervision:

This section is now divided into 2 parts – a) Receiving Supervision and b) Supervising Others.

2.4 a) Receiving Supervision:

Most audit submissions presented evidence of the type, frequency and duration of supervision received and were found to be meeting recommended guidelines. Most submissions were in one of the following forms:

- A statement (either in the form of a signed letter or an email) from the supervisor stating the frequency and duration of supervision, sometimes including a brief statement of their opinion of the registrant.
- A log stating the name of the supervisor and dates the registrant and supervisor met, generally signed or initialled by the supervisor.
- A brief statement from the registrant or peer regarding attendance at peer and/or group supervision. This statement was normally further endorsed by the supervisor, facilitator or other peer within the group.

8 registrants did not provide supervision or enough information and were asked to send additional information or clarification.

3 registrants received feedback regarding requirements for the level or appropriateness of supervision.

2.4 b) Supervising Others:

2017 marks the first year that we asked registrants whether they were supervising others, and the average hours they spent with those supervisees.

Of the 191 auditees who completed a submission, 106 said they supervised others. This ranged from a total of 2 hours to 480 hours for the year, averaging 107 hours for the 106 supervisor registrants.

At the upper end of the scale the individual with the highest hours supervising others (480) was also undertaking 960 client hours in employed practice. The individual who had the highest client hours (2460, 2400 of which are in employed practice) also supervised others for 425 hours.

The 2 registrants at the lower end of the scale averaged 2 hours each supervising others with one registrant not seeing clients, and the other registrant undertaking 400 client hours.

The mid-range generally reflected either a balanced number of client and supervisee hours, or double the number of client hours to supervisee hours.

2.5 Evidence of CPD:

As with previous audits, we asked auditees to provide evidence of CPD activities undertaken within the audit period.

UKCP recognises that the CPD policies of its organisations are likely to be varied and need to reflect the diversity of the modalities. They should have the flexibility to allow individuals to develop in ways that are meaningful to them.

Bearing this in mind, registrants were informed that any of the following would be acceptable as evidence of CPD:

- A log of CPD and corresponding hours, as well as:
- Course attendance certificates or receipts
- Seminar, workshop or conference attendance certificates or receipts
- Teaching work
- Committee work
- Subscriptions to professional journals
- Peer review reports

The majority of registrants provided a log or statement of the CPD that they had completed over the past year. Most of these auditees completed the sample CPD form that we provided, making it easier to see the variety of CPD undertaken. A few auditees used their organisation's own form. In some cases this was due to the fact that these had already been completed to comply with their OM's CPD policies and procedures.

The majority of CPD reviewed revealed a varied mix amongst registrants with a majority reading psychotherapy and related journals, and attending relevant workshops, lectures, seminars and conferences.

The majority of registrants also submitted supporting evidence in the form of certificates from courses, workshops and conferences attended over the last 12 months.

It was necessary to contact 10 auditees to submit CPD or provide additional CPD.

8 registrants received feedback regarding their CPD, with most being advised to increase the variety of CPD in order to meet UKCP and college requirements.

2017 marked the first year we recorded the number of hours each member undertook.

The minimum number of CPD hours expected of our members is 20 hours in any given year, with a minimum total of 250 hours to be achieved over a 5 yearly period.

Of the 191 auditees who submitted for the audit, the total average CPD was 141 hours.

Whether someone is practising via an employer or practising privately does not necessarily have any bearing on CPD hours, as evidenced by looking at the 2 highest and 2 lowest CPD achievers who were audited. Interestingly none of these 4 at the extreme ends of the scale are supervising others.

Location of Registrant on list of CPD hours	CPD Hours	Employed Client Hours	Private Practice Client Hours
Low CPD	21	280	0
Low CPD	21	1224	0
High CPD	652	480	600
High CPD	1198.5	0	500

2.6 Insurance:

Evidence of professional indemnity insurance was provided with the vast majority of submissions. In most of the remainder submissions (for example, registrants who practice within the NHS) insurance is covered by the employer and a brief statement was usually sent instead.

Many of the auditees held professional indemnity cover privately through various insurers, including Balens, Holistic Insurance Services, Howden, Oxygen, PPS, Towergate, and others.

A number of registrants did not include a statement that they were covered by their employer or did not include proof of professional indemnity insurance (either current or from the audit period) and had to be contacted, generally via email with a reasonably quick response.

NB: It is important to note this is the key item that we chase auditees for when reviewing submissions.

Year	Total submissions received	Registrants chased for additional info
2017	191	26 (14%)
2016	181	34 (19%)
2015	174	13 (7%)
2014	209	36 (17%)

5 auditees were provided various feedback to meet UKCP requirements, including increasing their minimum indemnity limit to £1 million.

2 of those registrants were found not to have professional indemnity insurance because they are practising exclusively in another country. Both managed to obtain insurance, but through added expense and difficulty. This raised wider issues around insurance and what is accepted by UKCP's CCP requirements. UKCP and the CCP has revised requirements and now does not require UK-based professional indemnity insurance for those not practising within the UK, but still requires some form of appropriate and adequate professional indemnity insurance.

3. CONCLUSIONS

3.1 Conclusions for 2017 Annual Random Audit:

We continue to improve the audit processes and information tracking, providing better organisation, better communication with registrants, and more informative reports.

The 2017 Audit saw a continuation in the process of how and when registrants were notified of their selection for audit. Auditees were selected in January from those full clinical registrants who have not been selected for audit in the past 5 years, and then divided up alphabetically into batches of approximately 26 each.

Those 8 batches, plus the batch of auditees deferred from last year, were then sent an email giving them a deadline and a copy of the improved Guidance Notes. These 9 deadlines allowed for continued better support of the auditees, better communication with auditees, better prioritisation of workload, and improved outcomes for the Regulation and Quality Assurance team.

The use of batches to segment the audit resulted in greater efficiency due to the completed submissions arriving within a predictable timeframe. The majority of audit submissions received were processed within 1 to 3 weeks (where additional evidence was not requested), resulting in increased customer service and improved outcomes.

Most registrants made great efforts to supply the documentation requested in a timely manner or to contact us if they were going to be delayed. Each auditee who had not sent their submission a week prior to their deadline received a gentle reminder of the upcoming deadline.

The 'batch' system and improved auditee support has led to a continued steady increase of submissions

being received within a month (or less) of the original due date since we began tracking, and a specific increase of 2% in compared with last year.

Year	Total submissions received	Received by original deadline	Received within 1 month of deadline	*Total received within 1 month of deadline
2017	191	145 (76%)	36 (19%)	95%
2016	181	146 (81%)	21 (12%)	93%
2015	174	132 (76%)	25 (14%)	90%
2014	209	72%	8%	80%

In addition to those advantages of the 'batch system', we believe the number of requests for extended deadlines has continued to decrease over the past few years due to ongoing consideration of the potential holiday periods in relation to the proposed batch deadlines.

The improved Guidance Notes for this year helped to streamline the review process, and make it clearer for both the auditees and the auditors. There was an 8% drop in incomplete or incorrect submissions over the previous 2 years. The improved Guidance form meant we received higher quality submissions, and the improved CPD form meant many auditees' submitted lists/logs were typed and legible rather than handwritten.

We now track not only annual client hours (both in private practice and employed practice), but the number of hours our registrants supervise others. As we continue to track this information over the coming years, these statistics can be used to provide a snapshot of what our registrants' practice could look like, as these figures have not previously been available to UKCP.

There was a 5% drop in members being chased for their insurance documents, likely due to further clarification and the improved checklist in the guidance notes. Alongside this, as a result of 2 registrants struggling to obtain appropriate professional indemnity insurance, UKCP has revised its requirements for CCP. Registrants are not required to have *UK-based* professional indemnity insurance, but rather some form of appropriate professional indemnity insurance within the country in which they practice.

The UKCP Membership Committee (MC) introduced a process last year for the referral of registrants who had been selected for audit where the auditee was retiring, resigning membership, did not submit, or it was clear that an audit submission indicated that the auditee was not meeting UKCP registration requirements. This process was developed in order to strengthen and better support the regulation behind the audit.

4 registrants did not submit audit documents, which is considered a failure to meet audit requirements. All 4 were sent to the UKCP Membership Committee for decision on whether to remove them from the UKCP register. It was decided by the MC that all 4 be removed from the Register, and this was undertaken by the Registrar and the Membership Team.

2 registrants were withdrawn from the audit due to having retired or winding down. While the number of retirees is low this year, in previous years, this number has been as high as 10.

Year	Resigned registration	Retired from the Register	Removed from the Register for not submitting	Total who left the Register
2017	4	2	4*	10
2016	10	3	--	13
2015	5	10	--	15
2014	4	10	--	14
2013	4	1	--	5

*This is being tracked differently from previous years.

A membership category for those who are retiring or winding down has been proposed. This could include relaxed requirements around CPD and supervision, but would encourage registrants not to leave the register entirely until such time as they are no longer seeing any clients.

3.2 Regarding 2016's recommendations:

The following recommendations were made as part of the 2016 report:

- *Continued improvements and updates to audit processes, letters and guidance for future audits, including:*
 - *Further amendment to and clarification of the Guidance Notes, in particular clarifying how client hours are presented and clarifying the role of the MC in the process now that this committee is functional and can investigate audit referrals.*

This was done, and as a result, 8 registrants were contacted for further information regarding client hours compared with 10 last year. Generally the submission quality around client hours was better informed and consistent.

- *Further clarification that the audit process is independent from the CPD checks, accreditation and reaccreditation procedures that are devolved to OMs and colleges. We recommend insertion of the following statement to the guidance notes: 'UKCP carries out an annual random audit of registrants, which is a separate process to CPD checks or 5-yearly reaccreditation processes conducted by organisational members (or the college in the case of direct members).'*

We had very few comments from auditees this year regarding this.

- *The Guidance notes were updated in light of our recommendations to the PRCCF. Areas of amendment have been commented on throughout this report.*

We further clarified the audit guidance, and then combined the audit guidance and application form into one document. With all of the information in one document, this made things easier for the auditee to complete, and easier for us to review. This also reduced the possibility of accidentally omitting information or evidence.

There was an 8% drop in the number incomplete or incorrect submissions.

- *Use the new CRM effectively to ensure efficient and robust selection, recording and reporting in relation to the audit.*

We have created effective fields for tracking relevant information within the database which allowed us to run a detailed report in relation to the audit, as evidenced by the information found within this report.

- *A revision to batches for 2017. By reducing the number of batches by 1 and increasing the size of each batch will ensure that the final batch will receive notification of audit in June/July, ie well before their membership fees for the following year are due (or automatically taken). The audit process therefore will be completed earlier, by the end of September, allowing the R&QA Team more time to compile the report and revise the process in advance of starting the following year's audit.*

The audit process was completed before the renewal period, allowing auditees who were retiring or resigning to do so prior to their renewal. This also ensured that any 'stragglers' were supported more closely as the audit wound down. All but one audit were received by mid-October.

- *Discuss retaining certain audit data for 5 years, and at the point of an organisation's QR we filter the information to reveal general trends in audit submissions for that OM's registrants. This information could give tangible evidence to inform and support discussion.*

This is still under discussion.

- *Set up a dedicated page for audits on the new UKCP website, which will include all audit information, such as the audit policy, the audit guidance notes, a FAQ, possibly links to college CPD documents, Membership Committee referral process, and any other relevant processes and information.*

This is still being worked on.

- *Have a discussion about the risks involved with not receiving certain CPD evidence (such as committee work or peer group meetings which aren't supervision) vs the resources of chasing this evidence combined with the added workload on the auditee.*

We determined this was low risk, as evidence of committee work is only sometimes provided, and the bulk of most CPD is evidenced with certificates, letters, and etc. Most members' CPD focuses on workshops, lectures, conferences and self-directed research/reading.

4. RECOMMENDATIONS

On the basis of the audit returns and feedback from registrants, OMs, and PRCCF, we are discussing the following potential recommendations in relation to the 2018 audit and future audits:

- Creating a CRM report showing the registrant's OM/college in order to check for patterns in colleges and OMs, and then review the report in advance of a QR to determine any trends in audit outcomes for the

OM/college which can be discussed at the QR.

- To include with wider discussions around quality assuring our registrants – discuss the possibility of, as part of the audit, reviewing an auditee’s FAT profile to ensure they aren’t claiming to work with a client group which they aren’t registered to work with (i.e. children/young people).
- Should audit reports be published? And if so:
 - to whom (ie the audience for the report: public, members only, OMs only, or etc.)? A clear statement would be required as to who will have access to the report.
 - where (members area, public website, bulletin, etc.)?
 - would it be the whole report or just this year’s stats?
 - when? (ie after PRCCF reviews it, or etc)
- Continued clarification of client hours for the year and number of hours for the year supervising others.
- With GDPR coming in, it is recommended that asking for qualifications or insurance certificates should no longer be part of the process. In part, this is due to retention of the data, but as well, it is largely unnecessary to the quality review process to see these certificates.

It is recommended instead that:

- A) the R&QA team continue to review OM processes as part of the QR for accrediting individuals onto the UKCP Register (which thereby negates the need for reviewing qualifications), and
- B) the audit guidance form be amended to ask for the following:
 - Name of Professional Indemnity Insurer (or if covered by an employer, the name of the employer)
 - Policy number
 - Expiry date