

# BRITISH/ PSYCHOANALYTIC /COUNCIL

## Acceptance Criteria

### About Us

1. The British Psychoanalytic Council (BPC) is the UK's leading professional association and accredited public register for psychoanalytic psychotherapy. The BPC is a voluntary accredited register; registering psychoanalytic psychotherapists and psychodynamic psychotherapists and is accredited by the Professional Standards Authority (PSA).
2. The core functions of the BPC are to:
  - Set and maintain standards of practice and conduct;
  - Maintain a register of qualified psychoanalytic and psychodynamic psychotherapists ('Registrants');
  - Assure the quality of education and training provided to Registrants by their Member Institutions;
  - Require Registrants to keep their skills up to date through continuing professional development;
  - Consider and investigate complaints and concerns of a Fitness to Practise nature raised against Registrants and issue sanctions, where appropriate to protect the public, act in the public interest, uphold the standards of the profession, and maintain public confidence in the profession.
3. The BPC's Council of Member Institutions ('MI') agreed to the introduction of a centralised Complaints Procedure in 2007 and conferred the responsibility for considering complaints raised against Registrants to the BPC.

### Purpose of this Document

4. The purpose of this document is to provide guidance to BPC staff members, Registrants, Complainants, MI's, and members of the public. This document will clarify those matters where the BPC can open an investigation into whether a complaint or concern raised in relation to a Registrant amounts to an allegation of impaired Fitness to Practise.
5. The BPC's Fitness to Practise Procedure is designed to safeguard the public. The BPC's Fitness to Practise procedure is not intended to serve as a general complaints resolution process or resolve civil disputes between Registrants and patients.
6. This document should be read in conjunction with the Fitness to Practise Procedure to provide further information regarding the Fitness to Practise process holistically.
7. The BPC will regularly review this document to ensure that it remains consistent with other BPC associated guidance documents.

## **Fitness to Practise**

8. 'Fitness to Practise' essentially means that a Registrant has the requisite skill, qualification, knowledge, experience, health, and good character to complete their job effectively and safely.
9. Fitness to Practise may involve issues outside of the professional or clinical sphere. A Registrant's conduct outside of work may call into question his/her Fitness to Practise if they engage in conduct which is likely to undermine public confidence in the profession and/or affect protection of the public.
10. By quality assuring the Fitness to Practise of our Registrants, the BPC upholds the standards of the profession, maintains the reputation of the profession, and ensures public safety.

## **Acceptance Criteria meaning**

11. The BPC uses Acceptance Criteria to determine whether a complaint or concern ('complaint') of alleged impairment of Fitness to Practise can be accepted for formal investigation.
12. A Registrant's Fitness to Practise can be found impaired on one (or more) of the following grounds ('Impairment Grounds'):
  - Professional Misconduct;
  - Deficient Professional Performance;
  - Adverse Physical or Mental Health;
  - Adverse Determination against the Registrant by any other professional regulatory body either in the UK or elsewhere;
  - A criminal conviction or caution received in the United Kingdom, or a criminal offence committed elsewhere which, if committed in England or Wales, would constitute a criminal offence
13. If a complaint meets the Acceptance Criteria, the BPC will open an investigation into whether the Registrant's Fitness to Practise is impaired.

## **Outcomes at the Acceptance Criteria stage**

14. When considering a new complaint, the BPC can determine to:
  - Open an investigation;
  - Open an investigation and refer to the Interim Orders Committee;
  - Close with no further action;
  - Close with no further action and refer to another body
15. If a complaint does not raise concerns regarding impaired Fitness to Practise, the BPC will close the complaint without taking further action.

16. Where a complaint is closed, the complaint will remain on the BPC's file-management system in accordance with the BPC's retention policy which can be located here: [www.bpc.org.uk/regulation/complaint-handling/](http://www.bpc.org.uk/regulation/complaint-handling/)
17. If a complaint does not raise concern regarding a Registrant, or the Registrant was not acting in a psychotherapy capacity at the relevant time, the BPC will either refer the complaint or signpost the Complainant to the most appropriate regulatory body.

### **Complaints that will be accepted**

18. Registrants must always have regard to the BPC's Code of Ethics and supplementary Ethical Guidelines or any future revised version of the Code of Ethics.
19. When considering a complaint on receipt, the BPC will determine:
  - a. **Whether the person against whom a complaint of alleged impairment of Fitness to Practise is raised is a current BPC Registrant** – The BPC can only consider complaints raised against current BPC Registrants e.g. those Registrants currently on the public register.
  - b. **Whether the conduct forming the subject matter of the complaint of alleged impairment of Fitness to Practise took place within the last five years** - The BPC will not consider complaints where the alleged conduct took place more than five years ago unless it is in the public interest to investigate the allegation.
  - c. **Whether a breach of the Code of Ethics has occurred** – The BPC will determine whether there has been a breach of the Code of Ethics or any future revised version of the Code of Ethics.
  - d. **Whether the breach can amount to an allegation of one of the Impairment grounds** – The BPC will consider whether one or more of the Impairment grounds (see below) are engaged as a result of the breach.
20. The BPC will also assess a complaint for risk and determine whether there is any risk to the public, the maintenance of the public confidence in the profession, and the need to uphold the standards of conduct and behaviour expected of the profession should a complaint not be opened and formally investigated.
21. Where a complaint raises serious risk to public protection, the public interest or the Registrant's own interests, referral to an Interim Orders Committee may be necessitated.

### **Impairment Grounds**

#### **Professional Misconduct**

22. In determining whether a complaint amounts to an allegation of Professional Misconduct, the BPC will consider:

- Whether the complaint concerns a Registrant's conduct?

23. If so, the BPC will consider:

- Whether the conduct was linked to the practice of psychotherapy or conduct which would otherwise bring the profession into disrepute;
- Whether the conduct is a grave one-off incident or a course of conduct;
- Whether the conduct complained of is serious and fell short of the generally accepted standards of practice expected by fellow practitioners;
- Whether the conduct would be considered deplorable by fellow practitioners.

24. Examples of complaints which may amount to Professional Misconduct include:

- Unwanted or inappropriate sexual conduct with patients, colleagues, or employees;
- Inappropriate use of social media;
- Clinical failings arising during the treatment of one or a few patients;
- Significant breaches of professional boundaries e.g. accepting money from a patient which is not remuneration for psychotherapy sessions;
- Criminal activity without going through the Courts e.g. theft not reported to the Police or receiving an Adult Community Resolution Order ('ACRO') as a means of example.

25. Examples of complaints which may not amount to Professional Misconduct include:

- Breakdown of the patient therapeutic relationship where there are no aggravating features and no public safety or public interest concerns;
- Concerns that have already been addressed at a localised level and where regulatory intervention would be disproportionate;
- Poor complaint handling with no aggravating features

### **Deficient Professional Performance**

26. In determining whether a complaint amounts to an allegation of Deficient Professional Performance, the BPC will consider:

- Whether the complaint concerns the Registrant's performance;

27. If so, the BPC will consider:

- Whether the Registrant's standard of professional performance is unacceptably low with reference to a fair sample of the Registrant's work.

28. An example of Deficient Professional Performance would include poor record keeping for multiple patients.

### **Adverse Physical or Mental Health**

29. In determining whether a complaint amounts to an allegation of adverse physical or mental health, the BPC will consider:

- Whether the Registrant is suffering from an adverse physical or mental health condition;

30. If so, the BPC will consider:

- Whether the Registrant's adverse physical or mental health condition is continuing or episodic in nature;
- Whether the Registrant is receiving medication, treatment, or assistance for their condition and has the necessary insight into their condition;
- Whether the Registrant's adverse physical or mental health poses a risk to the public, patients, or the Registrant themselves.

31. Examples of complaints which may amount to adverse physical or mental health, but are not exhaustive, include:

- Conduct concerns where health is likely to be a contributory factor;
- Drug or alcohol related criminal offences;
- Instances where the Registrant lacks insight into their condition and/or fails to seek medical treatment or ceases with their treatment/support mechanisms.

### **Adverse determination against the Registrant by any other professional regulatory body either in the UK or elsewhere**

32. An adverse determination by another professional regulatory body in the UK or elsewhere will, ordinarily, automatically amount to an allegation of impairment of Fitness to Practise.

33. However, and when considering whether a complaint raised on this ground should be accepted for formal investigation, the BPC will consider:

- Whether the determination is linked to the practice of psychotherapy;
- Whether the determination raises patient safety concerns;
- Whether the determination raises public interest concerns e.g. would the adverse finding bring the profession into disrepute and affect public confidence in the profession.

### **A criminal conviction or caution received in the United Kingdom, or a criminal offence committed elsewhere which, if committed in England or Wales, would constitute a criminal offence**

34. In determining whether a complaint amounts to an allegation of Impaired Fitness to Practise by virtue of conviction or caution, the BPC will consider:

- Whether the Registrant has received a conviction or caution in the UK; or

- Whether the criminal offence committed outside the UK, constitutes a criminal offence in England and Wales.

35. If so, the BPC will consider:

- Whether the conviction or caution is linked to the practice of psychotherapy;
- The nature and gravity of the offence committed;
- Whether there are public interest concerns warranting investigation of the conviction or caution e.g. does the Registrant's conviction/caution bring the profession into disrepute

36. A copy of the conviction/caution is proof of the conviction/caution received.

37. The circumstances of each conviction or caution received will be considered. An example of a conviction/caution which is unlikely to be further investigated includes:

- Speeding Offences (without public interest concerns).

### **Notification to Parties**

38. Once the BPC has considered a complaint, the BPC will notify the Registrant and Complainant of the decision in writing by letter and/or email.

### **Review of Decision**

39. Where a Complainant is unhappy with the decision reached at this stage, they may request a review of the decision.

40. If the Complainant wishes the decision to be reviewed, they must notify the BPC in writing, by email to [FTPO@bpc.org.uk](mailto:FTPO@bpc.org.uk), within 10 days from the date of the decision letter and provide their reason(s) why. Within the subject line of the email, please write 'Acceptance criteria – Review of Decision.'

41. On receipt, the request will be provided to another clinician, alongside the original decision, and they will decide whether they agree with the initial decision or not. Any requests received outside of the 10-day timeframe will not be considered.

42. The review decision is final, and the Complainant will be notified of the decision in writing within two weeks.