

Independent Practitioners Network

Briefing Document

The Independent Practitioners Network [IPN] is a growing and increasingly substantial feature of the UK psychopractice¹ landscape. This Briefing Document seeks to answer the questions that clients, employers and other interested parties may have about IPN.

At the time of writing, early 2000, The Independent Practitioners Network has six full member groups, forty-two prospective groups and around seven hundred participants.

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¹ Psychopractice refers to the whole spectrum of modes of human enquiry in which people are encountered as persons. It is inclusive of any activity in which people engage with themselves and others in enquiring into their personal functioning, their relationships, their politics, their deficits, their wishes, dreams, spirituality etc. Thus 'psychopractice' includes both psychoanalysis and co-counselling, both NLP and the native American tradition.

What is IPN?

IPN is a national network of practitioners which offers an accreditation route based on continuing peer assessment. Practitioners in IPN come from a wide variety of therapeutic and educational backgrounds. IPN was founded in 1994 and is independent of training and accrediting bodies. The IPN Principles and Procedures (see Appendix A) outlines its structure and aims.

How does IPN work?

The basic unit of the Network is a member group of at least five and, usually, not more than ten practitioners. Practitioners may negotiate to join an existing group, or join with others to form a new group. The business of the group is getting to know each other both personally and as practitioners, so that 'we can stand by each other's work', that we are each satisfied that each group member is competent to do what they say they do. How this is done is up to each individual group: it involves self and peer assessment, coupled with supervision/consultation about client work.

To be a full member group of IPN each group is required to

- develop and sustain links with at least two other groups that are prepared mutually to 'stand by' the quality of their group process. These link groups monitor, support, challenge and help deal with any problems which may arise;
- 2) publish to the whole Network a statement of the group's ethical commitments ($see\ Appendix\ B$).

National Gatherings of the Network are open to IPN member groups, IPN participants (people whose group is not yet fully formed or which does not yet have links) and to other interested persons.

Regional Gatherings are held from time to time throughout the UK.

A number of participants serve as regional contact persons (see Appendix D).

Information is disseminated throughout the Network via paper and electronic media.

Who runs IPN?

No individual or group runs IPN. No individual or group is empowered to speak for IPN. Proposed policies or procedural improvements/modifications are circulated to IPN participants and discussed at a National Gathering. Decision-making in the Network is through pluralistic consensus. Individuals are empowered to promote or develop local initiatives, so long as they are within the IPN Principles and Procedures framework and they don't claim to represent or speak for IPN as a whole. Policy and procedures evolve through ongoing discussion throughout the Network.

Pluralistic consensus: an ongoing process which considers all options available, listens to all views and supports a variety of outcomes being pursued simultaneously. This approach implies an emphasis on issue identification, exploration and a 'sense of the meeting' rather than on adversarial proposals and counter-proposals. Unresolved issues are held open for further discussion and all decisions remain subject to subsequent modification.

Who can join IPN?

Participation in the Network is open to any practitioner. There is no individual membership, only group membership. In practice, joining or forming an IPN group is a demanding task requiring persistence, integrity, independence of mind, emotional competence, a capacity for negotiation and self-direction, and a developed ability to form and sustain relationships.

How does IPN relate to the regulation of psychopractice?

IPN is devoted to client/practitioner accountability. While affirming the right of others to form 'professional' associations, whether register-based or trade alliances, many people within IPN regard the professionalisation of psychotherapy and counselling as damaging to the interests of both clients and practitioners. IPN participants have made a considerable contribution to the debate about professionalisation (see Appendix C).

Why does IPN not have a central administration with an executive?

IPN attracts participants who see competent psychopractice as including awareness of interpersonal and social power-relations. From such a perspective, a horizontal, non-hierarchical, low-bureaucracy organisational approach seems a better match for the ways that most practitioners relate to their clients than 'chief executives', 'governing' boards, and 'investigating' committees that mimic existing top-down hierarchical arrangements.

Is IPN open to Bernard Manning?

Theoretically it would not be impossible for Mr Manning to become a member of IPN but to do so he would have to find a group of at least four practitioners who are prepared to stand by his work as a practitioner. His group would have to produce a code of ethics and be seen as practising ethically by at least two link groups on an ongoing basis (which in turn would be monitored by at least two others, and so on).

How does IPN deal with arievances?

In the event of conflict arising between a practitioner and a client, the practitioner's group will facilitate the situation using a conflict resolution model. When necessary, it can draw on its linked groups and, ultimately, on the resources of the Network, to ensure that all parties feel the issue has been properly dealt with.

Does IPN have sanctions for inappropriate/incompetent conduct?

If, following a grievance from a client reaching a participant's group, inappropriate/incompetent conduct is established, the group may withdraw, or make conditional, the 'standing by' decision that they had reached in relation to the participant. They may ask the participant to leave the group. If the link groups are not satisfied with the way the grievance has been handled, either of them may withdraw their link, following which the linked group ceases to be an IPN member.

How does IPN ensure 'safe' practice?

IPN practitioners participate in an intense, pro-active quality assurance programme that seeks to minimise incompetent and inappropriate practice through continuous monitoring. Since this monitoring, which includes both participants' practice and their personal lives, is an ongoing and prospective, rather than retrospective, process, it also supports innovation and development.

Why doesn't IPN join existing professional umbrella organisations?

As will be apparent from the above, IPN participants highly value participation, power-sharing, parity, and peer assessment. These qualities are seen as congruent with the relations that they have with clients. Many IPN participants are deeply sceptical of the perceived domination-driven power relations of the presently active umbrella organisations. This institutional style is seen as reproducing the dominance/subjection power relations at the root of almost all abuse in human relationships and as profoundly incongruent with how their registrants actually relate to clients. For these reasons it seems inappropriate that IPN join existing psychopractice umbrella organisations.

Can clients and employers presume that IPN participants are as reliable as participants in other accountability cultures?

Clients can presume that IPN members' practice and, uniquely, their personal qualities are subject to close continuing scrutiny; that their co-participants are satisfied with their competence to practise in the mode, and with the client population, they have defined; and that in the event of difficulties, in addition to the practitioner's own group colleagues, at least fourteen other IPN participants from the link groups are committed to helping resolve any conflicts.

Clients and employers may decide that this process is at least as reliable a route to competent psychopractice as other accountability cultures which emphasise 'qualifications', 'academic entry requirements' and reactive and punitive misconduct detection processes that mimic the medical and other professions.

Isn't IPN's practice of 'standing by each other's work' a recipe for practitioner collusion?

Collusion—secret/unconscious conspiracies to avoid noticing/challenging what we or others are doing appears to be a universal human phenomenon that arises from our need to 'belong'. It is especially prevalent in institutions where coercion is used to enforce compliance with rules and regulations of which participants feel little or no ownership. Being self-defining and co-creating, IPN groups are at least as likely to be free of these reasons for failing to notice unacceptable conduct. However collusion may still be presumed and one of the tasks of IPN link groups is to look out for it.

How does IPN benefit clients?

As a client you can presume that your IPN practitioner is an active participant in a continuing process of face to face scrutiny of their competence, health and well-being by a group of other practitioners who know them well enough to 'stand by their work'.

How does IPN benefit employers?

Due to the thoroughness and continuity of the IPN route to accreditation, employers can presume that the ethical standards and competence of practice within their defined area of work of members of IPN full member groups are entirely comparable with, and may often be superior to, that of practitioners who subscribe to 'registration' and 'certification' forms of accountability.

Will IPN attract unscrupulous practitioners?

No. Such persons would immediately see how unlikely it would be that they could conceal their tendency to abuse or exploit clients from the scrutiny of ongoing long-term group participation.

Does IPN train practitioners?

IPN has no training function and is independent of training organisations.

How does IPN compare with other UK accountability cultures?

IPN provides an ethically sound and practical alternative to the four existing accountability cultures, BCP, BPS, BAC and UKCP. It seeks to value diversity and local knowledge rather than unitary, expert knowledge,³ and is supported in this by numerous research findings⁴ that there is little or no correlation between extensive theoretical knowledge, length of training and beneficial client outcomes. The IPN accountability process matches what we do in our contact with clients, i.e. it promotes autonomy, self reliance and self accountability, in interaction with significant and trustworthy others. As will be apparent from the above, IPN participants highly value participation, power-sharing, parity, and peer assessment. These qualities are seen as congruent with the relations that they have with clients. Many IPN participants are deeply sceptical of the perceived domination-driven power relations of existing umbrella organisations, which they see as profoundly incongruent with how their members actually relate to clients.

In Conclusion

IPN is a remarkable piece of leading edge social innovation that reverses the top-down dynamic of conventional accountability structures in favour of devolving responsibility for competence and ethical conduct to localised, continuing, face to face contact. By its existence IPN is very challenging of the mainstream approaches to accountability, since it represents the kind of social creativity that is in danger of being eliminated or severely restricted by statutory regulation.

³ See Totton (1999).

⁴ See House (1997), Mair (1992) and Mowbray (1995; a particularly strong piece of research is Seligman (1995)).

References

- **House, R.**(1997). Training: a guarantee of competence? In R. House & N. Totton (Eds), *Implausible Professions: Arguments for Pluralism and Autonomy in Psychotherapy and Counselling* (pp. 99-108). Ross-on-Wye: PCCS Books
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- **Seligman, M.E.P.** (1995). The effectiveness of psychotherapy: the consumer reports study, *American Psychologist*, 50(12), 965-974

APPENDICES:

Appendix A IPN Principles and Procedures

 ${\bf Appendix\ B} \\ {\bf Sample\ ethical\ statements} \\$

 ${\bf Appendix}~C \\ {\bf The~professionalisation~debate}$

 $\begin{array}{c} \textbf{Appendix D} \\ \textbf{Contacting IPN} \end{array}$

Appendix A

Independent Practitioners Network

Principles & Procedures

November 1999

A. Principles

- 1. The Network exists to further and support good and empowering practice which is open about its aims and underlying principles. It seeks to assure those looking for a practitioner that Network practitioners can provide and sustain a suitable environment for the work offered and are able to communicate clearly their particular form of work to each other and to the public.
- 2. The Network seeks to develop a culture of openness, mutuality, support and challenge within and between its member groups.
- 3. Member groups are committed to fostering evaluation and accountability through an ongoing process of self and peer assessment.
- 4. Each group takes responsibility for resolving problems which may emerge in the practice of its members, including issues raised by clients. It accepts that its membership of the Network stands or falls by how it carries out this responsibility and is, therefore, prepared to have its process examined, supported and challenged by other groups, and to do the same in return.
- 5. The Network specifically favours diversity and ecological complexity, and has no commitment to any particular model of therapy, therapy training or therapeutic relationship.

B. Organisation

- 6. The Network is a system of linked groups which accept the responsibility of standing by each other's process of self-monitoring and issue resolution, offering support and challenge as appropriate. Links apply equally in both directions.
- 7. Membership of the Network is only as a group. A group will ordinarily comprise between five and ten practitioners who are prepared to know and stand by each other's work. In principle, groups are open to practitioners who are, in whole or in part, counsellors, psychotherapists, educators, complementary health, or any other allied practitioner.
- 8. A group becomes a Full Member Group when it provides and publishes:
 - an identifying name for the group, names of its members and a contact address.
 - · a copy of the group's code of practice/code of ethics or equivalent.
 - · names of two other groups willing to form links with the group.
 - · information about its history and its members' work.

- 9. A link may be withdrawn by either party, at which point a period of conditional membership, of up to 6 months, will obtain for each group until another link is formed. Similarly, if a group's membership falls below five they will have conditional membership, of up to 6 months, until it restores its numbers. In either case, the situation should be made known to the Network.
- 10. All full member groups have equal status within the Network.
- 11. To ensure the integrity of the Network, no three groups may link in a closed triangle.
- 12. In the event of conflict between a practitioner and a client, the practitioner's group will facilitate the situation using a conflict resolution model. When necessary, it can draw on its linked groups and, ultimately, on the resources of the Network, to ensure that all parties feel the issue has been properly dealt with.
- 13. The life of the Network will arise from the actions and interactions undertaken freely by its members. The Network as a whole has no power to constrain its member groups to any course of action, or to prevent them from any course of action. No group or individual has the right to speak on behalf of the Network. Decisions will be made by pluralistic consensus, defined as an ongoing process which considers all options available, listens to all views, and is one which supports a variety of outcomes being pursued simultaneously. This approach implies an emphasis on issue identification, discussion and 'sense of the meeting' rather than on adversarial proposals and counter-proposals. Unresolved issues will be held open for further discussion and all decisions will remain open to subsequent modification.
- 14. Action will only be taken on the Network's behalf after agreement is reached at a National Gathering and the circulation of any proposed action throughout the Network.

C. Administration

- 15. The Network's business will normally take place at National Gatherings, at least one of which must take place annually.
- 16. Attendance at National Gatherings shall be open to anyone who is part of a member group, a potential member group or an individual seeking to participate.
- 17. With the agreement of a National Gathering, individuals or groups will, from time to time, take responsibility for one or more of the following functions:
 - · to provide and maintain a public contact address for the Network
 - · to provide and maintain a bank account for administrative functions
 - to maintain and make available to the Network lists of member groups, of the individuals belonging to those groups and of the links between groups, of potential member groups, and of individual practitioners intending to participate

- \cdot to hold and circulate to other groups each member group's code of practice
- to produce and publish a "Network Communication" bulletin
 to provide liaison which enables the resources of the Network to be available to groups who require them
- · to arrange Gatherings or other meetings of the Network
- · to draw any issues or problems to the attention of the Network as a whole
- · to act as Regional Contact Persons
- · to liaise with, or otherwise relate to, other professional or relevant bodies

These Principles and Procedures replace the IPN Interim Constitution and reflect the evolving nature of the Network and its process.

Appendix B

Sample ethical statements from IPN groups

Leonard Piper' Practitioner Group (London)

ETHICAL STATEMENT

We are a diverse group of therapists who honour different ways of working. We share a belief in a holistic approach to emotions, body, mind and spirit.

We believe in the healing and enabling power of love. People have the potential to survive, recover and flourish, and to learn to move between these states gracefully and without shame. We believe this to be true for ourselves as well as for others.

CODE OF PRACTICE

We commit ourselves to respect and honour our clients.

We create a working environment which fosters emotional, mental, spiritual and physical unfolding.

We aim to help our clients find a balance between self development and relationship.

We attempt to see our clients within a social, political, cultural and spiritual context. We are committed to equal opportunities.

We are committed to acting with integrity in all our dealings with our clients. We work to help our clients empower and care for themselves.

We will be clear and specific about terms when agreeing to work with someone (e.g. meetings, fees, holidays).

We are committed to regular formal supervision and continuing personal and professional development.

We maintain confidentiality with regard to our clients, with the following exceptions:

- · we will discuss our client work in a confidential supervisory setting;
- where we perceive a significant risk of physical harm to self and/or others, after consultation with the client where possible; in the case of a statutory obligation.

We take responsibility as a practitioner group for dealing with problems that may arise in any group members' work, which cannot be resolved between the group member and the client.

January 1999

The Steel and Lace Group (Sheffield/Nottingham)

ETHICAL STATEMENT (revised November 1998)

As therapists our intention is to work with integrity, honesty and respect.

We have a commitment:

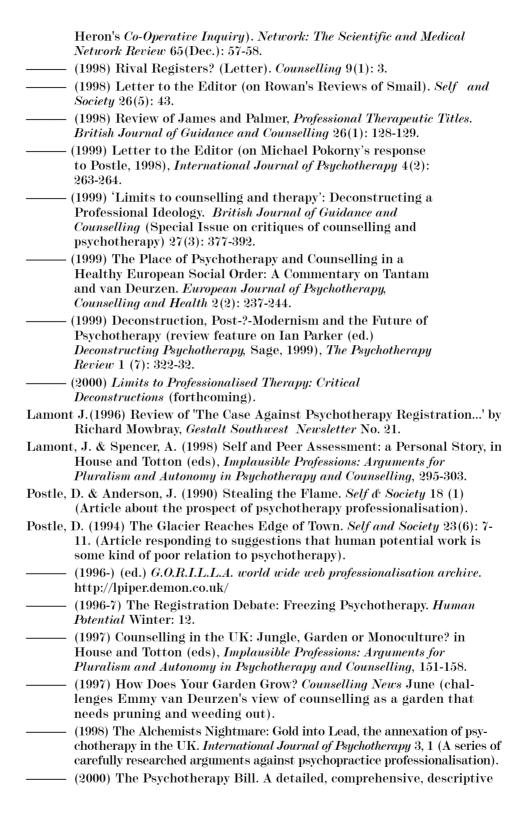
- \cdot $\,$ To work with the client to explore their potential for further well-being and development
- · To set and maintain clear boundaries
- · To provide a confidential service
- · To professional supervision
- To ongoing personal and professional development
- · To support the therapeutic process with creativity
- · To the principle and practice of non-exploitation

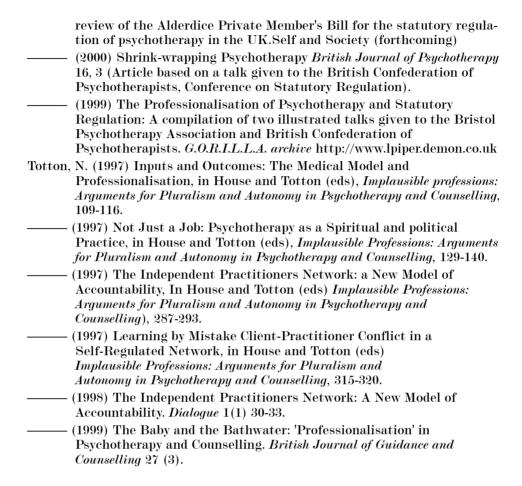
Appendix C

The professionalisation debate:

A listing of articles, papers and conference contributions by IPN participants

Bates, Y. (2000) Still Whingeing Changes Spring issue Hall, M. (1997) Stepping Off the 'Game-Board': A New Practitioner's View of Accreditation, in House and Totton (eds), Implausible Professions: Arguments for Pluralism and Autonomy in Psychotherapy and Counselling, 305-314. Hatfield, S. & Cannon, C.(1997) Uncovering the Mirror: Our Evolving Personal Relationship with Accreditation, in House and Totton (eds), Implausible Professions: Arguments for Pluralism and Autonomy in Psychotherapy and Counselling, 187-298. House, R. & Totton, (1997) eds. IMPLAUSIBLE PROFESSIONS: Arguments for Pluralism and Autonomy in Psychotherapy and Counselling. PCCS House, R. and Hall, J. (1991) Peer accreditation... within a humanistic framework? Self and Society, 19 (2): 33-36. House, R. (1992) A Tale of Two Conferences: Organisational Form and Accreditation Ethos, Self and Society, 20 (4): 35-37. — (1995) Review of Mowbray 1995. Clinical Psychology Forum December: 43-44 (also in Changes 14(1), 1996: 85-87). (1995) Letter on Professionalisation. Self and Society 23(5): 49. —— (1995) The Dynamics of Power: Why Mowbray Is Right about Professionalisation. Counselling News 20(Dec.): 24-25. — (1996-7) The Registration Debate: An Illusion of Policing. Human Potential Winter: 13. (1996) The Professionalization of Counselling: A Coherent 'Case Against'?. Counselling Psychology Quarterly 9(4): 343-358. - (1996) Letter (Response to Tantam on Professionalisation). Self and Society 24(3): 54-55. - (1996) To the Point (Critique of BBC's 'Watchdog' Programme). Counselling News 22(June): 3-4. — (1996) 'Diagnosing' the Growth of Counselling: Responses to Raj Persaud. Counselling 7(4): 276. — (1997) Participatory Ethics in a Self-Generating Practitioner Community, in House and Totton (eds), Implausible Professions: Arguments for Pluralism and Autonomy in Psychotherapy and Counselling, 323-334. (1997) From Professionalisation Towards a Post-Therapy era. Self and Society 25 (2): 31-35. — (1997) Correspondence: Registering Concern about Professionalisation. British Journal of Guidance and Counselling 25(1): 107-110. - (1997) A Professionalised Fetish Can Be Made of Supervision. The Therapist 4(4): 23 (published anonymously). — (1997) Participative New Paradigm Methodology (Review Article of





Appendix D

Contacting IPN

Regional contact persons

North

Nick Totton 86 Burley Wood Crescent Leeds LS4 2QL 0113 278 0230

East

Sue Hatfield 3 St Clements Hill Norwich NR3 4DE 01603 788221

Scotland

Graeme Thomas 19a Gardners Cresent Edinburgh EH3 8DE 0131 228 6522

Midlands

Rosemary Clarke 11 Crawford Close Leamington Spa CV32 7AH 01926 421928

West

Clive Oxford The Old Shop Kilpeck Hereford HR2 9DR 0198 157 0561

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Web-sites

 $\textbf{SELFHEAL}\ http://ourworld.compuserve.com/homepages/selfheal/ipn.htm$

IPNOSIS an Internet journal for the Independent Practitioners Network http://ipnosis.postle.net e-mail: denis@postle.net