PREAMBLE
Through lack of sufficient attention, we have ended up in a situation where a large number of therapy providers are dependent on unpaid ‘volunteer’ therapists who are either in or newly out of training, and who need to build up their hours of work experience in order to complete their qualification. A culture has developed whereby therapy providers and their funders assume they will structure the financial planning for the provider organisations with no salary requirements being included for many or all of the therapists. Training colleges equally contribute to this cultural status quo, assuming that students will be prepared and able to volunteer their time in order to qualify.

This may seem superficially like a good and equitable fit: providers cannot afford to pay enough experienced practitioners, and trainees cannot qualify without sufficient hours of practice. It is now clear, however, that the current system is not at all equitable: calling trainees ‘volunteer’ therapists obscures the fact that they have no real choice in the matter, while conditions of work are often profoundly unsatisfactory, and they are asked to work with clients often arguably beyond their competence. As well as being inherently unjust, the current model contributes to restricting counselling and psychotherapy training to those who are either relatively wealthy, or prepared to make a considerable sacrifice.

Society as a whole has made it clear over recent years that unpaid work, either with or without an element of coercion – e.g. either ‘interns’ or benefit seekers – is not acceptable. Therapy and counselling are lagging behind on this issue in a way which is quite shocking, and the Psychotherapy and Counselling Union is determined to start a sea change in our culture. We recognise that providers cannot instantly find a new pot of money and that the changes required may be difficult, so that some of what follows is an aspiration for the future. But it is crucial to start somewhere, and to start now.

An organisation which provides therapy needs to work in a therapeutic style; and managers and other staff who are not trained therapists need to become informed about what therapy is and what its special needs are. This is the context for much of what follows.

THE CODE
We invite providers, funders and training organisations, to sign up to the following code (much of which some of the best providers are already meeting).

1. Trainees should be allowed, and encouraged, to join and be represented by a union, and should be informed about the Psychotherapy and Counselling Union.

2. It is vital that there is a safe procedure for employees to report bullying, misconduct and harassment to someone with authority but outside their direct line of management – for example, a trustee, but preferably an external reference person.

3. A three way contract between the trainee, provider and training organisation should be put in place to support the trainee and protect their potential clients, with trainees and providers acting cooperatively to develop a good working alliance that creates an optimal environment for all parties including the client.
4. All of trainees’ expenses incurred through doing the work should be met by the provider. This includes, but is not limited to, appropriate supervision at a frequency at least matching the recommendation of their training body (line management supervision is not an acceptable substitute); travel; insurance; childcare; photocopying; stamps; DBS checks; and membership of professional bodies when required or expected.

5. Real care must be applied to matching trainees with clients with whom they are competent to work, whether through professional training or life experience. Trainees may be encouraged to work with clients presenting with more complex issues once they have gained sufficient experience. They should be able to feel safe in asking for help or stating that they are not competent to continue working with a client, and there must be no reprisals for their honesty.

6. Trainees are encouraged to participate in planning and development processes at provider organisations where this is possible. Trainees are invited to have a voice in provider organisations both to offer their unique perspective on the service and to have space to speak up about what works and doesn’t work well.

7. Trainees must be included under the provider’s whistleblowing policy (see the companion Code of Practice for Employing Qualified Practitioners).

8. Whenever possible, trainees should be paid at least the Living Wage for their work, unless they waive payment voluntarily. This means that providers will need to start factoring this cost in to their grant applications. This will help to balance trainees’ comparative inexperience with the demanding work they are being asked to do, and their lack of real choice about doing it. It will restore human dignity to their position. (Achieving this may also involve persuading professional awarding bodies to change their position on payment to trainees.)