
Quality Assurance in Psychotherapy: Meeting the Challenge

Quality in the healthcare system calls for safe, adequate and focused patient care. The care must be provided by a licensed professional and enhance the patient's quality of life in a cost-efficient manner. Overall, the goal of the intervention is to bring forth patient and population-specific improvements at a greater rate than in the absence of treatment. Quality in psychotherapy refers both to the psychotherapeutic service as well as to an organization's internal processes. Ultimately, it is a proxy for the degree to which treatment corresponds to specific expectations.

These expectations must be explicitly stated. An example includes the ethical guidelines governing psychotherapy. As a quality assurance tool, these general guidelines describe the values and expectations in the context of ethical treatment practices attempting to discern positive from negative actions. On the contrary, the therapist's role as an aide in the individual patient's healing process requires chiefly a subjective set of values. However, quality assurance of universally valid treatment practices must always adhere to objective-phenomenological ethical guidelines.

–

QUALITY ASSURANCE IN SWITZERLAND – A STATUS REPORT

As evidenced in recent years, quality assurance has come to play an increasingly important role in psychotherapy. Yet, the general population and professionals alike are hesitant to renounce their image of a presumably flawless therapist. The widely held belief that due to their academic training therapists are "better" people that deserve unconditional trust is worrisome. But the psychotherapeutic community is resisting: Many German and Swiss therapists fear the denunciation of their profession.

Fear in this regard however is counterproductive. The arising controversy in fact strengthens the profession through its assessment of therapeutic services and subsequent transparency of the therapeutic process. It subjects traditional psychotherapy to qualitative evaluations, at long last lifting the curtain on what much too often takes place behind closed doors within the protected space of therapeutic encounters. The publication of successful case documentations in literature is not apt to assure the effectiveness of psychotherapy.

Patients are seldom aware that they have a right to question therapeutic procedures. When they do voice doubts, they are often considered defiant. Nobody truly encourages patients to cast doubt on academic knowledge and psychological practice. The therapist's expectation of the patient's absolute trust is contrary to the level of self-responsibility and self-efficacy that the patient is to reach during the course of treatment. This uneven relationship provides an unnecessary protection for the therapist. Many reports as well as experience have demonstrated that the formulation of ethical guidelines alone is inadequate concerning the right to a healthy mutual skepticism in the patient-therapist relationship. This deficiency may impact the quality of therapeutic services.

Quality assurance is of special importance in the treatment of young adults and children, as verbal capacity and critical expression may be in early stages of development.

Given these circumstances, traditional psychotherapeutic principles may only be of limited use. In fact, challenging the professional requirements of ethics, diligence and of supervision in psychotherapy strengthens the field ensuring continued progress. Misgivings alone are not enough, however. Psychotherapeutic circles must collaborate to start a new discourse about open

questions regarding quality assurance. Insofar, the Ethics Pilot Project conducted by the Swiss Charta for Psychotherapy signals a good start.

–
SPIELZEIT AND QUALITY ASSURANCE

In its 22nd year of operation, Spielzeit Child Psychotherapy is a community-oriented charitable organization located in Zurich composed of a team of therapists that provide individualized play- and psychotherapy to children in crisis. In collaboration with parents, agencies and external caregivers such as teachers and doctors, we support children in redefining their place in life and society.

Our therapeutic principles ground on the notion that people with problems, mental/physical challenges and serious illnesses are individuals as unique and complete as their “healthy” counterparts and not – in contrast hereto – deficient of “normal” attributes. People with unique challenges are entitled to unconditional acceptance and social encounters that are free from performance pressure and purpose-driven expectations. The basis to our approach to understanding rests on the analytical psychology of C. G. Jung and M.-L. von Franz.

Spielzeit’s conceptual methods are tailored to the individual needs of the child. The theoretical framework calls on the works of Rogers, Perls or Gendlin, Integrative Movement Therapy or, when indicated, behavioral interventions. Our practice-oriented, eclectic approach allows for *induction*, which frees the therapeutic process and setting from a preconceived theoretical framework. Consequently, hypotheses and theories may arise from direct observations. Their relevance is then tested in practice and only if they facilitate a meaningful understanding of the therapeutic process can they be considered useful in the therapeutic process. This dynamic interaction empowers all parties involved in the treatment and incorporates their experiences in the healing process. This approach resembles a repeated “trial run” while intensifying the processes of empirical observation as well as the child’s therapeutic experience overall.

The inductive approach enables the Spielzeit team to unconditionally embrace our young patients’ illnesses, mental/physical challenges and traumas. Whatever children’s means of communication may be – a sound, their body language, a gesture with the foot – it is always an appeal to us for contact! Various communication modalities are used to initiate contact by a specialized professional and every session is digitally recorded. Thus, even the language-challenged child is enabled to be heard and empowered as an active participant. Digital recording builds the cornerstone for Spielzeit’s quality assurance: Therapists can challenge their own practice, compare the quality of their performance and improve their skills through supervision. Free from a therapist’s convenient assumptions or descriptions, the child can thrive and be taken seriously, ensuring the effectiveness of therapy.

Not academic knowledge but the powerful presence of our vis-à-vis promotes scientific insights and guides our participation in the difficult process of healing a wounded psyche. Insofar, our therapeutic performance meets the strict standards of objective ethics principles.

Zurich, December 2006

Robin Mindell, M.Sc.

We are interested in your feedback:
<http://www.spielzeit.ch/en/form.html>