Gatekeeping in the Mental Health Professions

edited by
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To mentors, who we often want to be when we become professionals, and the careers they model of integrity and compassion, who do the hard work with the students who need it the most.

—KLH

To clinical faculty and supervisors, the frontline gatekeepers for our respective professions, for your courage and commitment to developing future ethical, effective clinical professionals and redirecting those who are unable to attain expected standards. Thank you for protecting the quality of the mental health community and those who seek our expertise to pursue their fullest potential.

—AMH
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The term *gatekeeper* is a metaphor for those who monitor or oversee the progress of others while simultaneously controlling admission or access to an entity. In the context of career preparation programs, the gatekeeper is an experienced member of a profession who oversees the academic and clinical development of individuals preparing to enter the field while upholding professional standards for the welfare of future clients. Allowing qualified individuals to successfully progress through training and pass through “gates,” such as graduation and licensure, implies that those individuals have met minimal clinical training standards.

Gatekeeping is the inherent responsibility of educators and supervisors in the mental health professions. Jurisdictional regulatory and licensing boards, accrediting bodies, and professional associations mandate gatekeeping in laws, rules, standards, and ethics codes. The health professions are increasingly being held accountable for developing standards and enacting practices that fulfill quality assurance expectations that protect the public and safeguard clients. The effects of *gateslipping* can be life threatening and/or result in long-term psychological injury. Passing unqualified students for graduation or endorsing incapable supervisees for licensure endangers the welfare of others. Ignoring gatekeeping mandates risks harming a trainee or other colleagues who may be affected by his or her actions, compromises the integrity of the clinical professions, and diminishes the trustworthiness and reputation of mental health training programs and related agencies. Gatekeeping is also a very challenging professional responsibility. The literatures in each of the allied professions—counseling, social work, psychology, and marriage and family therapy—reflect the challenges of the gatekeeper’s role.
The goal of this book is to support faculty and supervisors to engage effectively in the tasks and challenges of the gatekeeping process. The book has been written with the intention of bringing together the developing body of professional performance standards for trainees from multiple behavioral health fields. It is accompanied by suggested standards for best practices across the myriad gatekeeping tasks and processes. This book aims to be a guidebook for clinical faculty and supervisors that supports the development of gatekeeping practices and policies found in the current literature. This volume can also be useful in training new supervisors and doctoral students preparing to assume the role of gatekeeper. The philosophical foundations supporting gatekeeping are examined, along with suggestions for best practices and tools and templates that can be used with trainees.

A trainee’s fitness in the domains of academic and clinical ability can be readily established through the use of evaluative measures that assess commonly held standards for performance. However, evaluating trainee competency in the domains of interpersonal behavior, intrapersonal functioning, and professional conduct to determine readiness to practice is much more subjective. This critical domain of trainee development—the heart of the gatekeeping focus—is less clearly defined and lacks common agreement within and across the mental health professions; thus, it is typically the area of greatest concern for clinical educators and supervisors.

Chapters in this book discuss the following topics addressing gatekeeping in terms of the professional conduct and personal behavior of students and supervisees.

Chapter 1 provides an introduction to gatekeeping by reviewing the foundational principles that guide gatekeeping practices. It begins the discussion of ethical principles and legal concepts pertinent to gatekeeping that are woven throughout the book as they pertain to various practices or stages of the process.

Chapter 2 defines the lexicon that is specifically relevant to the practice of gatekeeping, offering a compilation and background review of key terminology. Professional terminology is introduced that should be avoided, along with the background or history of the word usage and current recommended language for practice. General legal perspectives, such as due process and liability, are applied to the practice of gatekeeping, in addition to vocabulary and definitions found in other guiding documents in the clinical professions.

The challenge of addressing problematic trainees, a concern of every faculty member and supervisor, is the focus of Chapter 3. The author of this chapter proposes the development of policies, systems, and strategies for assisting students and supervisees who are exhibiting problematic behavior in their developmental process as clinical professionals.

Recognizing that training is a developmental process and that all trainees have unique personal identities, Chapter 4 encourages...
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gatekeepers to be sensitive to and respectful of the broader contextual factors that may overlay trainee functioning. This chapter represents one of the inherent tensions in gatekeeping: upholding professional standards and the duty to protect future clients while simultaneously being sensitive to trainees’ developmental processes and caring for their individual experiences and differences.

Chapter 5 offers descriptions of the roles and responsibilities faculty and supervisors have in gatekeeping activities as defined by professional standards. This chapter considers the various mandates for training practitioners, including licensure laws, accreditation standards, and codes of ethics from the mental health professions.

An important aspect of efficacious gatekeeping is garnering active support and participation from multiple constituencies. Chapter 6 describes the multiple institutional influences that interact to support or hinder the gatekeeping process. This chapter identifies potential stakeholders and suggests methods of collaboration essential to successful gatekeeping.

How does a clinical program or agency site inform students and supervisees about expectations for personal behavior and professional conduct? Chapter 7 identifies procedures for clearly advising prospective trainees about graduate program or agency expectations, standards, and gatekeeping policies at various points of contact, starting with admissions.

Chapter 8 reviews the literature from the mental health professions about trainee problems of professional competency. Empirical research on the personal behavior and professional conduct of trainees is reviewed in order to assist programs in constructing their own set of expectations and standards for trainee performance.

Once programs identify expectations or standards for trainee behavior, they must undertake the process of evaluating the meeting of those behavioral standards. Chapter 9 suggests methods for assessing and evaluating trainee conduct and behavior and offers a review of formal measures currently available in the field.

Chapter 10 describes best practices for intervening when trainees demonstrate problems with professional competency. In some situations, trainees may struggle with change, may be incapable of meeting required standards of behavior and conduct, or may be unwilling to comply with standards. A range of possible strategies and interventions is offered in this chapter, including formal remediation plans and accompanying remedial interventions.

Throughout the gatekeeping process, documentation is critical for legal and ethical reasons. Chapter 11 suggests best practice procedures in documenting, such as verifying that published procedures were followed, documenting subsequent actions taken, and verifying trainee actions and reactions. Examples of documentation formats are illustrated in this chapter.
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Avoiding the need to engage in gatekeeping processes, the situation preferred by most professors and supervisors, can lie in prevention efforts. Chapter 12 offers strategies for preempting the development of problematic behavior in trainees and for curtailing problems through education, relationship building, and other early intervention approaches, including the admissions process.

The appendices offer a detailed review of ethics codes from several professions that directly address gatekeeping functions. Sample documentation and forms that may be adapted for use in practice are also included for readers of this book. These include sample correspondence and examples of evaluation and prevention strategies.

In sum, this book aims to be a practical resource to assist educators and supervisors in the practice of gatekeeping and to give doctoral students and future supervisors a foundational understanding of the gatekeeping process. As a fundamental responsibility of faculty and supervisors, gatekeeping represents an ethical imperative to address the struggles and challenges trainees may experience in their development, which could lead to harming clients. The ethical mandate speaks not only to protecting the clinical professions and the public from harm but also to providing trainees with transparent feedback regarding their competence and their likelihood of success as professional clinicians. During their time of struggle and challenge, effective feedback and remedial support from gatekeepers can offer trainees an opportunity, should they choose to accept it, to achieve success and develop into competent, ethical, and professionally effective clinicians.
About the Editors

**Alicia M. Homrich, PhD,** is a professor in the Graduate Studies in Counseling program (accredited by the Council for Accreditation of Counseling and Related Educational Programs) at Rollins College in Winter Park, Florida. She is a licensed psychologist and licensed marriage and family therapist in the State of Florida, a national certified counselor, and a qualified supervisor. Dr. Homrich has been researching, publishing, and presenting on the topic of gatekeeping for more than 15 years. Her goals for publishing this book are to encourage faculty and supervisors to support optimal clinical trainee development by engaging in gatekeeping processes during pre- and postgraduate training, to safeguard clients, and to uphold the practice standards of the clinical professions.

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