

Notification of Complaint Outcome and Sanctions

Complaint Number: 070223

Member: Venus Salem

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The complaint

The complaint was brought against Venus Salem membership number 4076 on 7th March 2023 complaint number 070323

The complaint allegations

The Complaint was conducted following allegations made against COSRT Registration Number 4076. The complaint comprised seven particularised allegations.

1. As of 7th February 2023, VS publicly presents qualifications in a manner that could lead Service Users to reasonably believe VS is a medical practitioner by using the title Dr without accompanying PhD reference on platforms such as Twitter (<https://twitter.com/iamvenussalem>) and a business website (<https://www.houseofvenus.co.uk>).
2. Public information refers to VS as a “Jungian psychoanalysis practitioner” without VS having the relevant specialist training or qualifications, leading to potential Service User confusion.
3. VS refers to a Doctorate (PhD) in relation to therapeutic service provision without accompanying information such as awarding institution, mode (for example, professional or research) or topic, and in doing so risks Service Users facing unnecessary confusion as to whether post-graduate qualifications are relevant to the provision of Psychosexual and Relationship Therapy.
4. The Doctorate (PhD) referred to by VS in relation to therapy provision is not a formal post-graduate qualification awarded through standard academic processes from a UK University or equivalent foreign institution, and its presentation therefore represents a risk to the credibility and reputation of COSRT and the professions it serves.
5. VS uses or advocates (in relation to therapeutic practice) therapy, interventions which do not have robust or scientifically verifiable evidence bases such as “astrological approaches,” “astrological reading”, and “energy healing sessions” thereby undermining the credibility and reputation of COSRT and the professions it serves.
6. VS makes unsubstantiated and unverified claims about service success rates, namely “I have successfully worked with clients who have had serious addiction or compulsive behavioural difficulties related to sex, drugs and alcohol with 100% success rate” that, because of an absence of related information and evidence (on key issues such as service focus, methods/tools, or outcomes), could reasonably be seen as undermining the credibility and reputation of COSRT and the professions it serves.
7. VS has offered to or has carried out therapy with a minor without the appropriate and necessary training. In doing so, VS has sought to work beyond the limits of her professional competence and remit.

Relevant COSRT Code of Ethics clauses

Complaints are conducted using the Code of Ethics in place at the time of the alleged activity. In this instance the COSRT Code of Ethics and Conduct 2022 version was in place, and the following items within that are relevant to this complaint:

15. Recognise and work within the limits of your competence and remit, including using supervisor feedback to understand these limits.

19. Have proper, evidenced training and a current full disclosure DBS (Disclosure and Barring Service) certificate to work with people under the age of majority or classified as persons with learning disabilities or vulnerabilities.

29. Only provide or advocate therapy with robust and scientifically verifiable evidence bases.

42. Not act or behave in a way (in and out of professional life) which does or could reasonably be expected to harm the reputation of, or trust and confidence in, COSRT or the professions it serves.

44. Follow all the requirements laid out in COSRT policies and procedures.

45. Be honest about your experience, qualifications, affiliations, and current and past roles.

49. Not do or say anything that might lead a Service User to reasonably believe that you hold a Protected Title or are a licensed medical practitioner in the UK or elsewhere when you are not.

This should include:

- a. Avoiding any improper, unjustified, or potentially confusing use of words commonly associated with medical roles and Protected Titles in job titles, biographies or similar.

50. Only use the titles Doctor or Professor in relation to therapy work if:

- a. The Doctorate is relevant to therapy (including medical Doctor where applicable) and is from a UK University or equivalent foreign institution

PCP Resolution Meeting

The PCP considered the complaint on 22nd March 2023 in a PCP resolution meeting.

The PCP considered the allegations and all related evidence gathered. The PCP made the following conclusions:

Allegation one. Proven

The PCP noted that the Member titled herself as Dr Venus Salem on her website and in Psychology Today as evidenced by the screenshots seen in evidence.

The PCP felt that the use of this designation without suffix or full explanation, whether MD, PhD or similar, could cause some service users to believe the individual was a medical practitioner due to the context of Dr being used in relation to advertising mental health services.

Allegation two. Proven

The PCP noted that evidence showed that the Member claims on her Psychology Today profile that: "I am a Jungian psychoanalysis practitioner". The PCP considered that this statement could reasonably be seen as the Member claiming to carry out specialised clinical practice.

The PCP noted that whilst this does not relate to a protected profession, ordinarily an individual would be expected to undertake specific training to work as a psychoanalyst (practicing psychoanalysis).

No evidence was seen that showed the Member has any specific training in any mode of psychoanalysis practice. Within written submissions the Member claimed that there was no claim to be a 'Jungian

analyst'. And that Jungian concepts are used in practice, drawing on an interest in Jungian concepts that came from an MA in creative writing.

The PCP noted these statements from the Member but considered that the public statement made on which the allegation rests was clear enough to causes service users confusion about training and qualifications.

Allegation three. Proven

The PCP noted that screenshots seen in evidence showed that in some instances, the Member referred to having a PhD without information being given on the topic, awarding institution or similar. The use of PhD was on sites related to advertising therapy services.

The PCP noted inconsistency in the use of suffixes (see allegation 1). The PCP also considered that were a service user to see reference to PhD in the context of therapy service advertising, they may believe that PhD was directly relevant to or indeed integral to the provision of specialist therapy services.

The PCP considered that the inconsistent and incomplete provision of information to potential service users could cause unnecessary confusion.

The PCP noted that the Member, in written submissions, accepted that there could be confusion related to the PhD mentioned.

Allegation four. Proven

The PCP considered narrative evidence that claimed the Member had a PhD from the Institute of Metaphysical Humanistic Science. A screenshot about the organisation was also in evidence.

The PCP considered that the institution would not meet the standards of a formal awarding organisation in the UK. Nor did the PCP consider that a PhD from the organisation would meet the standards of a PhD in the UK.

The PCP also noted that despite the Member not sharing confirmation of qualifications, and that LinkedIn profile and other profiles did not refer to the institute, the Member is publicly denoted by the institute itself as having graduated from the institute with either a bachelor's, master's, or doctoral degree.

The PCP noted the lack of information provided by the Member about a claimed PhD. The PCP considered that the narrative evidence from credible witnesses who interacted with the Member regularly, combined with publicly available information indicated it was more likely than not that the PhD was from the institute in question and the use of Dr and suffix PhD in circumstances related to advertising therapy provision presented a risk to the credibility of COSRT and the profession it serves.

Allegation five. Proven

The PCP noted the Member's website, listings, and social media postings around what services they provided. The PCP noted that the Member clearly stated that they used a range of approaches that they considered not evidence based e.g., energy healer, spiritual scientist, and psychological astrologer.

The PCP considered that this could be seen to infringe the integrity and reputation of the profession, and of COSRT who require the use of verifiable, evidenced based approaches in service provision.

Allegation six. Proven

The PCP noted that the Member claimed 100% success rate in addiction treatment on their website:

"I have successfully worked with clients who have had serious addiction or compulsive behavioural difficulties related to sex, drugs and alcohol with 100% success rate."

The PCP noted that there was no evidence to support a claim of achieving a 100% success rate. The PCP also considered that to claim this demonstrated a lack of understanding of the relapse cycle within addiction work and compulsive behaviours, and as such is ambiguous. This statement could mislead service users and set up unrealistic expectations about the efficacy of the work which could then potentially be harmful to service users.

The PCP considered that the claim showed little evidence of specialist understanding or knowledge of working with addictions. The PCP also noted that there was no indication that the Member had specific training in addiction work, other than within basic training, and has not evidenced any further training.

Allegation seven. Proven

The PCP noted that evidence indicated the Member engaged in a discussion around a potential child referral in February 2023. The PCP noted that the Member appears to have offered to work with a 14-year-old child presenting with trauma.

The PCP noted that evidence indicated that colleagues questioned her qualification for this work. Despite it being pointed out by the other parties that additional specialist psychotherapeutic training was needed for working with children, the Member appeared to disregard this, and pointed to skills gathered from working in schools as skills to use in such an instance.

The PCP considered that this showed a disregard not only for child protection requirements, but for the specialist skills and knowledge needed to work with specific groups, issues, and settings.

The PCP noted that in written submission the Member acknowledged she did not have formal paperwork to back her offered experience, but that she did hold a DBS certificate.

Having considered the allegations and evidence, the PCP further considered a request from the Member (made on 1st March 2023) to conclude the complaint through a Consensual Agreement Resolution (CAR).

The PCP proposed a CAR comprising Membership Termination. The PCP requested that the draft CAR contract be sent to the Member for agreement.

The Member did not respond to the CAR contract proposed by the PCP.

In the absence of Member agreement, it was therefore not possible for a CAR to be formally agreed.

Accordingly, the Member was notified that the complaint would move to a Determination Hearing to permit the complaint to be concluded.

PCP Determination Hearing

As a required preliminary to the determination the PCP considered if, as the Member had not been in communication with COSRT, the conditions on section 24.5 of the COSRT Conduct Procedure were met. Namely:

24.5 If a Member chooses not to attend, has had adequate notice, procedures have been followed, they have been notified of the right to representation, and it is deemed in the public interest and interests of justice to proceed, then COSRT reserves the right to hold the hearing in their absence.

The PCP considered whether:

- It was in the public interest and in the interests of justice to proceed in absentia.
- There was evidence that COSRT had made sufficient efforts to contact the Member.
- Proper processes had been followed.
- The rationale for proceeding with the hearing in absentia.

The PCP decided it was appropriate to proceed in absentia.

The PCP noted the outcomes of the PCP resolution meeting on 22nd March 2023 and were satisfied that they were still valid.

The PCP formally concluded that it was their opinion that the Member had breached the following Code of Ethics and Conduct clauses: 15, 19, 29, 42, 45, 49 and 50

The PCP additionally considered that:

- The Member chose not to engage with COSRT in this process from the point at which a CAR was proposed.
- The Member appears to have shown no evidence or acknowledgement of the seriousness of these allegations.
- There has been no evidence presented of reflection or remorse from the Member.
- There has been no evidence of understanding the ethical guidelines that all Members of COSRT agree to work under.

The PCP concluded that the complaint should be disposed of with the following sanction:

Membership Termination

This termination will be applied in line with the Sanctions Protocol, and the Member will not be able to re-apply to be a Member of COSRT for a period of 5 years.

Any future re application for Membership will be considered by the PCP who would consider whether it is appropriate for the Member to become a COSRT Member again.