The GHR is the Registering Agency for the General Hypnotherapy Standards Council



(Ref.W-11/12)

BLOC	CK CAPITALS PLEASE									
Title a	and Full Name D.O	.B								
Addre	ess for Correspondence									
	Pi	ost Code								
Home	e Tel No Tel No.for Publication (if different)									
E.Ma	il									
has ever criminal unders whatever awarde any ar Insural period Please	by declare that the above information and all material enclosed with this application is correct. I confirm that river been sustained against me by any professional body. I further confirm that I have never been convicted all prosecution is pending. (N.B. If you are unable to confirm either of the foregoing sentences, please stand that continued Registration beyond each annual renewal date is strictly by invitation of the GHR and dever criteria are in place at that time. I agree to adhere to the GHR Code of Ethics. I understand that acceptance dis entirely at the discretion of the Registrar. I understand that in the event my application should be declined in the eight and registration fee sent at that time. I understand and accept that failure to maintain adequate Professionance (minimum indemnity - £1,000,000) throughout any period of Registration with the GHR will nullify that I of registration for subscriptions is 12 calendar months and that I am not entitled to a refund if I voluntarily cancer and elebete the following sentence if you do not agree) I agree that my contact details may be made access the format and on the GHR Website.	of a criminal offer e provide full, wr pendent upon my ce of my application ed, I will be entitled anal Indemnity & Registration. I undel my registration m	nce and that no itten details.) I compliance with and any grade to the return of Public Liability erstand that the hid period. (N.B.							
Pleas	se refer to " Notes for Guidance"									
i) ii) iii)	I have <u>enclosed copies of Supporting Documentation</u> relevant to my application I confirm my acceptance of the minimum Supervision requirements (<i>if applicable</i>) I confirm my acceptance of the minimum Continuing Professional Development requirements									
Sign	ed: Date:									
	OBLIGATORY ITEMS									
<u>ADM</u>	INISTRATION FEE									
		(Please tick all I	relevant boxes)							
ı enc	lose a CHEQUE in respect of the one-off administration fee in the sum of	<u>£15.00</u> -								
ANN	UAL REGISTRATION FEE (Select ONE option only)									
<u>OPTI</u>		C70 00								
	lose completed STANDING ORDER FORM in the amount of	<u>£70.00</u>								
<u>OPTIC</u> I enc	ON 2 lose CHEQUE in sum of	£80.00								
INSU	RANCE	-								
With	regard to the OBLIGATORY Professional Indemnity Insurance requirements:									
<u>l hav</u>	e enclosed a copy of my current provision									
l wou	uld like to receive information on the Schemes available through the GHR's Brokers	<u>i</u>								
	NON-OBLIGATORY ITEMS									
	uld like a SPECIALLY PRINTED DISPLAY CERTIFICATE escribed within the "Notes for Guidance") and enclose a CHEQUE for	£15.00								
	uld like my contact details forwarded to the Complementary & Natural Healthcar DoH sponsored regulatory agency for complementary medicine in the UK)	e Council								
		-								

Please make cheques payable to 'GHR'. All Applications should be returned to: The General Hypnotherapy Register PO Box 204 LYMINGTON SO41 6WP

NOTES FOR GUIDANCE

N.B. The Department of Health (DoH) has made it clear that in order for each Complementary & Alternative medical discipline to maintain the officially recognised professional status of Voluntary Self-regulation (VSR), certain essential mechanisms must be fully in place. Prominent among these are agreed minimum levels of "Supervision" and "Continuing Professional Development". As a direct result of the responses made to our National Survey (GHR Bulletin No.4, Autumn 2000) and after consideration by the GHR Advisory Board, minimum requirements for ongoing Registration have consequently been implemented.

SUPPORTING DOCUMENTATION

It is vital that the GHR maintains as complete a record as possible with regard to Registrants' relevant training and experience within the field. **Consequently, copies of appropriate documentation must accompany all applications for Registration** (*i.e.* Diplomas / Training Certificates etc.) Applicants must also provide the names and addresses for two independent referees, who we reserve the right to contact. These should be people of at least majority age but who are not related to you (or to each other), have had no involvement in your hypnotherapy training and who have known you for at least two years. We also reserve the right to personally contact applicants for the purpose of discussing their application prior to possible acceptance.

PROFESSIONAL INDEMNITY INSURANCE

Professional Indemnity & Public Liability Insurance is mandatory for Registration within the GHR. Although the GHR enjoys access to a choice of four particularly attractive and cost-effective Block Schemes, participation is <u>not</u> obligatory <u>provided Registrants are suitably insured elsewhere</u>. Applicants <u>with</u> current insurance must include copies of appropriate documentation with any application for Registration. Applicants <u>without</u> suitable provision should tick the relevant box on the Registration Form indicating that they would like to receive information on the schemes available through the GHR's Brokers.

SUPERVISION (Newly qualified Practitioners only)

Newly qualified Practitioners are expected to engage in this beneficial process for a minimum of 2 hours in any 3 month period during their first 2 years of practice after qualification. (Thereafter, although ongoing Supervision is encouraged, it becomes a voluntary process). Supervision may be conducted via "one-to-one", a "peer support group" or a telephone / e-mail arrangement where circumstance dictates. Whichever method is employed, Registrants are advised to maintain a personal log of all such activity as they may be asked to provide suitable evidence of the previous 12 months Supervision at the time of their annual re-registration. Current lists of both One to One Supervisors and local Peer Support Groups are published on the GHR website but any Registrant experiencing difficulty in making suitable Supervision arrangements may contact the GHR head office for assistance.

N.B. Registrants who undertake Supervision as a condition of their membership of other healthcare professions may apply to have this taken into account, providing that it is compatible with and relevant to the practise of Hypnotherapy.

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

CPD is considered to be important for practising Hypnotherapists in order that they may keep abreast of new developments and techniques within the field. Registrants are expected to participate in relevant CPD activity for a minimum of 25 hours annually whilst registered with the GHR. The GHR's definition of CPD includes appropriate reading, Internet research or personal attendance at relevant workshops. Practitioners may be asked to provide suitable evidence of the previous 12 months CPD involvement at the time of their annual re-registration and to facilitate this, samples of approved, user-friendly Data Sheets are available from the GHR head office on request.

N.B. Registrants who undertake CPD as a condition of their membership of other healthcare professions may apply to have this taken into account, providing that it remains compatible with and relevant to the practise of Hypnotherapy.

DISPLAY CERTIFICATES (Optional)

Specially Printed Display Certificates measure 28cms x 35cms (11ins x 14ins), are finished in raised burgundy and black ink with gold block logo on a hammered pale cream background, in portrait format and are presented unframed. Whilst they are the exclusive property of the purchaser, they only remain valid if accompanied by a current Registration Document (issued annually).

THE COMPLEMENTARY & NATURAL HEALTHCARE COUNCIL (CNHC)

Every GHR practitioner registered at Practitioner status (or above) is eligible for fast track registration within the CNHC, the DoH sponsored regulator for complementary medicine. If you have ticked the appropriate box on the Registration Form, your name and contact email address (or telephone number) will be automatically forwarded to them and they will subsequently contact you in order that you may consider registration with them.

The Benefits of Full Practitioner Registration with the GHR

- Affiliation with the UK's largest Professional Association for practising hypnotherapists
- *The acquisition of a standardised, professional award, the General Qualification in Hypnotherapy Practice (GQHP) or if applicable, the Senior version (SQHP)
- *A dedicated website, with <u>free</u> inclusion (and updates) of Registrants' contact details together with active links to their own e-mail addresses and websites (where available). **N.B.** There are no additional fees charged for multiple entries
- *Eligibility for fast track registration within the **Complementary and Natural Healthcare Council** (www.cnhc.org.uk) the Department of Health sponsored regulator for complementary medicine
- *Automatic acceptance under an International Reciprocal Alliance into either the Australian Hypnotherapists' Association (AHA) or the Association of Registered Clinical Hypnotherapists (ARCH Canada) for those practitioners wishing to relocate to these respective countries
- Fast track processing within the Central Register of Stop Smoking Therapists (<u>www.CRSST.com</u>) a dedicated website for smoking cessation practitioners
- *Free inclusion (where applicable) in the following additional Registers within the GHR website:
 - Related Approaches Registers: NLP / Meridian Therapies / Stress Management / Life Coaching
 - Special Interest Registers: Allergies & Skin Conditions / Children & Adolescents / IBS & Gut Related Disorders / Painless
 Childbirth Coaching / Pain Management / Past Life Regression / Performance Enhancement / Phobias, Panic & Anxiety
 States / PMT & Menopausal Symptoms / Regression Within Current Life / Weight Management
 - Ethnic & Foreign Language Speaking Register
- *Free nation-wide Referrals Facility
- Access to discounted professional insurance via a choice of four Group Schemes
- *Access to an exclusive Yellow Pages Corporate Advertising Scheme
- *Access to an exclusive Thomson Local Directories Corporate Advertising Scheme
- Discounted rates on <u>hypnotherapy books</u> from various suppliers
- Discounted rate on the <u>Money Saving Card</u> the UK's largest discount card
- Healthcare Plans available for just £1.50 per person per week from Benenden Healthcare Society
- Free publication and distribution of regular News Bulletins
- The publication of details of forthcoming CPD courses within a regular dedicated E-bulletin
- Free advertising of relevant products and services within the GHR website "Notice Board" section
- The provision of regional information (within the GHR website) to Registrants seeking peer group or personal supervision arrangements
- Advice with regard to obtaining Criminal Record Bureau Disclosures (CRB checks)
- The provision of relevant information and advice on all aspects of the profession to Registrants, the media and the public by experienced, specialist staff
- Free provision of the following user-friendly *Practitioner Audit Tools*:
 - *CPD Data Sheets*, as sponsored by the Department of Health and published by Greenwich University, for the maintenance of Continuing Professional Development records
 - Evidence Based Patient/Client Outcome Forms for the confidential monitoring of professional performance
 - Care Aims Forms for the measurement of clinical quality and assistance with reflective practice
- The dissemination of relevant information from the Department of Health and all other Agencies
- A Standards Council comprised of Representatives of (currently) more than one hundred and seventy professional and training organisations
- *Use of GHR/GHSC titles: "GHR Reg." / "GQHP" (or "SQHP") and logos:





The General Hypnotherapy Register

Bank Standing Order Form

(To be completed only if NOT paying your annual subscription by cheque)

ACCOUNT IN THE N	AME OF:					
YOUR ACCOUNT N	JMBER :			YOUF	R BRANCH SORT CODE:	
YOUR BANK OR BU	ILDING SOCI	ETY NAME:				
ADDRESS:						
					POST CODE:	
PLEASE CREDIT:						
Account Number: ()1373592	Bank: Lloy	/ds TSB - Lym	ington	Sort Code: 30-95-32	
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Please return your completed Form to: