



Introduction

This text translates the most important elements of the new law on mental health professions in Belgium. The law recognizes the clinical psychologist as an autonomous health profession. At the same time it reserves the practice of psychotherapy for medical doctors, clinical psychologists and clinical orthopedagogists.

This law (first voted in 2014) is a modification of an existing law (law on the health professions), which was itself revised in 2015. The law was then repaired in 2016. This makes the law in its rudimentary form difficult to read, so this text provides an oversight of the main articles important to understand the content and meaning of the law.

Nevertheless the actual numbering of the articles refer to the different versions of the law.

1. Legal History

- Law on the mental health professions first voted on 10/04/2014, which modifies the Royal Decree nr. 78 of 10 november 1967 concerning the exercise of health professions.
- Coordinated law concerning the exercise of health professions of 10 may 2015 which replaces the Royal Decree nr. 78 of 10 november 1967
- Law to modify the law of 04 april 2014 to regulate the mental health professions and to modify the royal decree nr. 78 of 10 november 1967 concerning the exercise of health professions, coordinated on 10 may 2015.

Chapter 1

Art.1 This law regulates a matter as meant in chapter 78 of the Constitution

Chapter 2 – Clinical psychology and clinical orthopedagogy

Art. 2 In art. 8, § 1, of the Royal Decree nr. 78 of 10 November 1967 concerning the practice of health professions, the following modifications are made:



- Clinical psychologists cannot interrupt an ongoing treatment before taking every precaution that the continuity of the treatment is assured by another clinical psychologist that has the same legal qualifications.
This continuity of care also entails palliative care and the treatment of pain
The Provincial Medical Boards will see that all health professionals obey the above mentioned directive.

Art. 3 The representative professional associations of clinical psychologists can erect a guard service that can guarantee the population a regular and normal service of health care, both in hospitals as at home. No practicing clinical psychologist can be excluded who meets the criteria on the condition that he/she subscribes to the household regulations and obeys the ethical code.

The associations as ment in the first paragraph inform the provincial medical boards of the guard service and every future modification.

The King can certain assignments as directed by Him concerning the local organization and concerning the representation of

Art. 4 No regulatory limitations can be imposed on clinical psychologists regarding the choice of means that can be used either for posing a diagnosis, or the indication and execution of treatment.

Art. 5 In the same royal decree an article 11bis is inserted, as followed:

“Art. 11bis Every practitioner of a health professional has the responsibility to refer a patient to another health professional competent in the matter when the health problem for which health care is needed surpasses the own field of competence.”

Art. 6 Are considered to be non - written in the contracts closed by clinical psychologists, every element that violates the freedom of choice as meant by article 4.

Art. 7 Every clinical psychologist has to give every useful or necessary information to another health professional designated by the patient to either continue or complete the diagnosis or treatment when so asked or with consent by the patient.



Art. 8 Keeping in mind the directives of article 10 , clinical psychologists have the right to fees for their performance with respects to the rules of the ethical code.

Art. 9 Keeping in mind the directives of art. 10, when a clinical psychologist uses personnel, rooms and material to exercise his profession, which are not to be considered as part of a payment and which are made available for the psychologists by a third party, the conditions for this use need to be determined in statutes or an explicit contract between the clinical psychologist and a third party.

Art. 10

Keeping in mind the directives of articles 8 & 9, any contract is forbidden between clinical psychologists, any contract between clinical psychologists and third parties, especially suppliers of pharmaceutical products or suppliers of medical products, when such a contract is related to the profession and leads to direct or indirect benefits or profits for either party.

Art. 11

It is forbidden for clinical psychologists to collaborate in any way to a third party or to lend his name with the purpose to avoid punishment for the illegal exercise of medicine.

Art. 12

In the same Royal Decree a chapter 1sexies is inserted, namely "The exercise of clinical psychology and clinical orthopedagogy"

Art. 13

In chapter 1sexies, included by article 12, an article 21quatercicies is inserted, namely:



“Art. 21 quater vices §1. Other than the medical doctor, only the keeper of a recognition given by the minister of Health can exercise clinical psychology.

In diversion with the first sentence, clinical psychology can also be exercised by someone who holds a recognition in the clinical orthopedagogy who possesses sufficient knowledge of clinical psychology. The King decides the conditions related to the training and the professional internship that are required to show that sufficient knowledge.

§2. The King determines, after advice from the Federal Council for the Mental Health Professions, the conditions to obtain, maintain or lose the in §1 referred recognition, the studies that need to be acquired and the internships that need to be realized in order to obtain the recognition in clinical psychology.

The recognition in clinical psychology can only be given to those who hold a masters degree in the domain of clinical psychology with at least a 5 year program or 300 points ECTS, included an internship within the domain of clinical psychology. Are equalized with a holder of a masters degree in clinical psychology, the holders of a masters degree in the domain of psychology which was obtained before the start date of the law and who can prove a minimum of 3 year professional experience in the domain of clinical psychology.

§ 3. Under the exercise of clinical psychology is understood, the common use of independent acts which have for purpose or are proposed to have for purpose, with a human and within the scientific based framework of clinical psychology, the prevention, the evaluation, the screening or the composition of a psycho – diagnosis of real or supposed psychic or psychosomatic suffering and the treatment or counseling of that person.

The King can clarify, after advice of the Federal Council for mental health professions, the mentioned acts and fix the conditions for their execution.

§ 4. In light of the exercise of clinical psychology, the recognized clinical psychologist is to follow a professional internship after his training.

The obligation to follow a professional internship does not apply to clinical psychologists who are already exercising clinical psychology on 1 September 2016.

The obligation does not apply either to students in clinical psychology who are in training on 1 September 2016 or who start their training ultimately during the academic year of 2016 – 2017.



The King determines the precise rules related to the professional internship.

The professional internship will take place in a recognized service of internships, under the supervision of a recognized internship mentor.

The internship mentors and services in the clinical psychology will be recognized by the minister of health or the authorized official of the Federal Public Service for Health, Safety of the Food Chain and Environment.

The King determines more precise criteria for the recognition of the internship mentors and services.

Art. 14 (concerns clinical orthopedagogists, not relevant)

Art. 68/2/1 § 1. Psychotherapy is a form of treatment in the health care through which one applies a coherent series of psychological means (interventions) in a consistent and systematic way, that are rooted within a scientific and psychological framework and for which interdisciplinary collaboration is required.

§2. The psychotherapy is exercised by a practitioner, namely medical doctors, clinical psychologists and clinical orthopedagogists, within a psychotherapist – client relationship, with the purpose to reduce or solve psychological difficulties, conflicts and disorders in the patient.

§3. To be allowed to exercise the psychotherapy, the practitioner as mentioned in § 2, needs to have followed a specific training in psychotherapy at a university or a High – school *. The training consists of a minimum of 70 ECTS points.

The practitioner also needs to follow a professional internship in the domain of psychotherapy of at least 2 years fulltime exercise or its equivalent in the case of part time exercise.

The specific training and the professional internship may take place simultaneously.

The King can determine more precise rules as to the above mentioned professional internship.



§ 4. In diversion of §§ 2 and 3, practitioners other than medical doctors, clinical psychologists or clinical orthopedagogists can exercise psychotherapy in an autonomous way as far as they resort under the following categories:

- a) Practitioners who will have ended their training ultimately in the academic year 2015-2016 under the following cumulative conditions:**
 - 1° they possess a recognized health title;**
 - 2° they have successfully followed a specific training in psychotherapy at an institution;**
 - 3° they can prove ultimately on 1 September 2018 that they exercise the psychotherapy;**
- b) Practitioners who will have started a specific training in psychotherapy on 01 September 2016 or will start during the academic year 2016 - 2017 under the following cumulative conditions:**
 - 1° they possess a recognized health title;**
 - 2° they have successfully followed a specific training in psychotherapy at an institution;**
- c) Practitioners who have followed a training of minimum bachelor degree that gives the right on a professional health title on 1 September 2016 or start such a training during the academic year 2016-2017 under the following cumulative conditions:**
 - 1° they possess a recognized health title;**
 - 2° they have completed the specific training in psychotherapy as meant in § 3, first section;**
 - 3° they have followed a professional internship, as meant in § 3, second section.**

§ 5. In diversion of §§ 2 till 4, practitioners who are not in the possession of a recognized health title can exercise the psychotherapy under the following cumulative conditions:

- a) The exercise of psychotherapy is to be considered in a non - autonomous way under the supervision of a practitioner as described in §§ 2 - 4;**
- b) The exercise takes place within an interdisciplinary constellation with intervision.**

The practitioners as described in section 1 are part of the following categories:

- a) Those who have ended their studies during the academic year 2015 - 2016 under the following cumulative conditions:**



- a. They have completed successfully a training of minimal bachelor's degree;
 - b. They have completed successfully a specific training in psychotherapy at an institution;
 - c. They can prove ultimately on 1 September 2018 an exercise of psychotherapy;
- b) Those who have started a specific training in psychotherapy on 01 September 2016 or will start one during the academic year 2016 – 2017 under the following cumulative conditions:
- a. They have completed successfully a training of minimal bachelor's degree;
 - b. They have completed successfully a specific training in psychotherapy at an institution;
- c) Those who have started a training of minimum bachelor's degree on 01 September 2016 or during the academic year 2016 – 2017 under the following cumulative conditions:
- a. They have completed successfully a training of minimal bachelor's degree;
 - b. They have completed successfully a specific training in psychotherapy as described in § 3, first section
 - c. They have followed a professional internship as described in § 3, second section

The law of 22 august 2002 concerning the rights of patients is applied on the practitioners of psychotherapy as mentioned in this paragraph.

§ 6. The King can decide through means of a decision consulted in the council of ministers, and after advice of the Federal Council for Mental Health Professions, to allow other health professionals to exercise the psychotherapy. The conditions for which need to be related at least to their basis training.

§ 7. The King can, after advice of the Federal Council for Mental Health Professions, define more precisely the psychotherapy and set conditions related to its exercise, such as the content that needs to be in the training and the professional internship, as meant in § 3, second section.

Art. 68/2/2

§ 1. The health professionals, medical doctors, clinical psychologists and clinical orthopedagogists, who exercise psychotherapy in an autonomous way, and the autonomous practitioners in psychotherapy, as meant in art. 68/2/1, § 4, can be assisted by assistants, the so – called supporting mental health profession.



The supporting mental health professions cannot pose autonomous diagnostic or therapeutic acts, but conduct prescriptions at the request and under the supervision of the in section 1 mentioned health professionals or the in section 1 mentioned practitioners in psychotherapy.

§ 2. The King can through means of a decision in the council of ministers, and after advice of the Federal Council for Mental Health Professions, determine the list of supporting mental health professions and the general criteria for the recognition of the supporting mental health professionals.

The King can, after advice of the Federal Council for Mental Health Professions, determine the specific criteria for each of the supporting mental health profession.

Art. 68/3

§ 1. A Federal Council for the Mental Health Professions will be constructed, hereafter referred to as “Federal Council”, who has the assignment to advise the Minister of Health, at her request or on its own initiative, on all matters concerning the recognition and exercise of the mental health professions, included the clinical psychology and the clinical orthopedagogy, and also concerning all matters regarding the practice of psychotherapy.

§ 2. The Federal Council will be composed in such a way that its members are especially familiarized with the exercise of a mental health profession or the practice of psychotherapy.

§ 3. The Federal Council is composed of the following 3 health professionals:

- a) The professionals clinical psychologists, composed of 16 clinical psychologists;
- b) The professionals clinical orthopedagogs, composed of 4 clinical orthopedagogs;
- c) The professional of medical doctors, composed of 8 medical doctors;

Each group of professionals will have an equal amount of Dutch and French speaking members.

Each group of professionals will have an equal amount of members who hold an academic function on the one hand and on the other hand members who exercise for at least 5 years a mental health profession or the psychotherapy.

The in the third section mentioned members who hold an academic position will be nominated on a list of double members by the faculties who organize the education that will permit the exercise of clinical psychology, clinical orthopedagogy or medicine.



The in the third section mentioned members who exercise a mental health profession, or the psychotherapy will be nominated on a list of double members by the representative professional associations.

The King will determine the criteria to assess whether or not an association can be considered representative as meant in section 5.

In the case where within a same language group of the professions as meant in the first section, b), no members can be found, orthopsychologists are also considered able to take a mandate within this professional group on the condition that the professional associations of psychologists nominating such orthopsychologists, mention in their statutes explicitly that their focus is also on orthopedagogy.

In the case of the application of section 7 no orthopsychologists can be nominated, also clinical psychologists can be considered to take a mandate within the professional group as described in section 1, b).

§ 4. The minister of Health or the Federal Council, can create working groups, that are either charged with a permanent or temporarily assignment.

Experts can be added to these working groups besides members of the Federal Council.

§ 5. To each working member of the Federal Council a replacement is added who meets the same conditions.

§ 6. The members of the Federal Council are appointed by the King for a renewable period of six years. The minister of Health nominates outside the members a president and vice – president of the Federal Council.

§ 7. The King determines the organization and the functioning of the Federal Council. The Federal Council can only gather and give advice in a valid manner when at least half of its working members are present or are represented through their replacement.

In the case that the presence quorum after a second call has not been reached, the Federal Council can in either way gather and decide in a valid manner.

The advices of the Federal Council are taken in a normal majority of present members.

In the case of an equal amount of votes, the voice of the president will be decisive.

§ 8. In the case where at least half of the members of one of the professional groups of the Federal Council, as meant in § 3, section 1, do not agree with the advice of the Federal Council, this professional group can give a separate advice through which it can explain its different point of view. This advice will be delivered to the minister of health together with the regular advice.



Art. 143/1

The Royal Decrees taken for the execution of article 68/1 and article 68/2 are taken after advice of the Federal Council for Mental Health Professions, on its own initiative or at the request of the Minister of Health.

When the ministers request an advice, the Federal Council will give its advice within a delay of 4 months. If that term expires, the advice is considered to be given.

Art. 17

Respecting the conditions of article 18, § 2, when a clinical psychologist, for the exercise of his profession, makes use of personnel, rooms and materials, that aren't subject of a payment and who are made available by a third person, the conditions for that use need to be determined in a statute or an explicit contract between the psychologist and that third person.

Art. 18

It is strictly forbidden for health professionals within the same discipline of medicine, any division of fees under any form, except if this division takes part in the organization of group medicine.

Art. 19

It is strictly forbidden for any health professional to collaborate with a third person with the purpose to avoid sanctions for the illegal practice of medicine.

Art. 35ter

The King composes a list of specialized professional titles and of special professional competencies for clinical psychologists.

Art. 35quater

No one can wear a specialized professional title or can call upon a special professional competency without being recognized by the Minister of health.



Art. 35duodecies

The King determines, through a decision within the council of ministers, the rules concerning the structure and organization of the practice of clinical psychologists. These rules do not apply to the diagnosis, the choice, the indication of treatment and its execution.

Under structure and organization of the practice, we can understand: the organization and management of the general medical file, the organization and, if need be, the recognition criteria for group practices and other collaboration possibilities, the description of roles and task agreements between general practitioners and specialists.

Art. 96

The King, through a decision within the council of ministers, based on a combined proposal of the ministers of Health and Social Affairs:

1° creates a “High Council for Health Professions”, which can be composed of departments for each health profession.

2° determines the composition. The medical department will be composed as followed: the minister competent for Health and the minister competent for Social Affairs, the representative professional associations, the insurance institutions, the universities and the scientific associations;

3° a) determines its missions, especially to give advice concerning the quality, evaluation and the organization of the medical practice of medical doctors and to compose recommendations for good practice. On its own initiative or at the demand of its competent ministers, the concerned departments can make proposals or advices concerning the quality of care, the organization of care and tasks agreement between health professionals.

Determines its missions, especially concerning the quality, the evaluation and the organization of the medical practice of all health professionals and makes recommendations for good practice; On its own initiative or at the demand of the competent Minister the concerned department formulates propositions or advices concerning the quality of care, the organization of care and task agreements between health profession.



4° determines its functioning. Before the definite decisions are taken by the appropriate organs concerning the in °3 related matters, proper concertation needs to be done in the related committees, erected in this law.

At the suggestion of the competent Minister different departments can work together.

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