

**FORMAL DOCUMENTS OF TRAINING STANDARDS AND MEMBERSHIP
COMMITTEE OF THE CPJA – to be used from 1 October 2012
Amended April 2013 to include guidance on role of Second Visitor**

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Criteria for Membership of CPJA for Training and Accrediting Organisations

The categories of Organisational Membership (as set out in the UKCP Byelaws)

1. Categories of Organisational Membership shall be as determined from time to time by the UKCP Board of Trustees.
2. Full Organisational Membership shall be for organisations providing training, and for organisations serving the professional development of its members, in accordance with approved UKCP standards.
3. Contingent Organisational Membership shall be for organisations working towards full membership requirements and is limited to 3 years.
4. Affiliate Membership shall be for organisations having a parallel purpose in the community.

The purpose of this document is:

- To guide teams of visitors, either to new applicant organisations or making quinquennial review visits, by indicating the areas to be explored;
- To demarcate the parameter outside of which a training is not acceptable to the CPJA;
- To serve as a guide to organisations who may wish to join the CPJA or become training organisations within CPJA.

This document accompanies the UKCP Generic Organisational Review and Applicant Organisational Assessment Questionnaires (2008). Please insure that the philosophy and training standards of CPJA will be reflected in your answers to the questionnaire.

The document is based on developments of agreements reached in 1992 and 1999 by UKCP member organisations of the Psychoanalytic, Psychodynamic Psychotherapy Section¹ and the Analytical Psychology Section. These sections have merged to form the Council for Psychoanalysis and Jungian Analysis, the CPJA, which is a College of UKCP.

This document should be read in conjunction with the following:

- Mapping of Standards of Proficiency which distinguish Psychoanalytic Psychotherapy [2008] (refer to page 11).
- A Guidance Note for CPJA Visitors for Quinquennial Review Process [June 2008] (Refer to page 16).

1 CPJA Philosophy Regarding Criteria for Membership

- 1.1 In the formation of the UKCP and its Colleges the initial work concerned the gathering the practices of training, accreditation and membership of societies that existed and creating a consensus. In the present the work consists of maintaining the grounds for conversations between individuals and organisations of the psychoanalytic field and keeping under review the criteria for membership of the CPJA to see how they may best serve the psychoanalytic culture of which it is a part.
- 1.2 The psychoanalytic culture is a discursive culture whose membership may perhaps be defined only by those who argue about its definitions. But it is important to keep in mind that the history of criteria for membership of organisations in this field may be considered

¹ See Criteria for Training 1992

traumatic.

- 1.3 The process by which criteria for membership is applied is understood as conversation between colleagues. The organisation which is applying, or, having its membership reviewed has the responsibility to give a coherent account of itself. The Training Standards And Membership Committee, which holds responsibility for accepting or not accepting a review or an application, is required to give a coherent account for its assessment and decisions.
- 1.4 The following training criteria state the usual practice within CPJA. They are thus both descriptive and generic. Variations from the generic standard need to be consonant with objectives of the course itself and to remain within the philosophy of the CPJA as set out below.
- 1.5 It is expected that the criteria will be understood as the base line on which trainings will expand and improve in accordance with their specified philosophy and that each organisation is able to set out its objectives as well as the reasons for any variations to the criteria.
- 1.6 Organisations evolve and consequently the need arises to re-examine and re-draft the CPJA's training criteria from time to time.

2 Philosophy and Aims Regarding Training, Accreditation and Membership

- 2.1 All member organisations, and hence all trainings within the CPJA, share a fundamental commitment to psychoanalytic theory. Psychoanalytic practice is one which endeavours to reach the underlying, often unconscious, sources of distress. Together with the therapist, the patient can explore free associations, memories, fantasies, feelings, and dreams, relating to both past and present. In the reliable setting of the therapy, which allows for regression, and in the exploration of the interactions, especially within the transference and counter-transference, between the therapist and the patient and, where applicable, between patients, each patient may achieve a new and better understanding of long-standing conflicts.
- 2.2 It is a unique and valuable achievement for CPJA to have encompassed the great theoretical diversity that exists within the field of psychoanalysis. Many facets enter into the differentiation between approaches and into the way these are translated into sets of prescribed training requirements. They include: the setting, client group and differing therapeutic goals. Some organisations within CPJA prefer to describe their trainings as psychodynamic rather than psychoanalytic. In so doing, they do not depart from CPJA's generic understanding of the word psychoanalytic, but seek to specify particular techniques in terms of duration of treatment, frequency of sessions and style of interpretation. In 1992, it was agreed that organisations may call themselves psychodynamic and that they will continue to be assessed on the overall structure and content of their trainings. It could be said that the difference between psychodynamic psychotherapy to psychoanalytic psychotherapy is that the former works with an understanding of transference issues without it being necessarily the focus of the work, whereas psychoanalytic psychotherapy is working within the transference, meaning that the therapist is the object for projections and transference issues from the patients internal world and that the work focuses on reflecting and interpreting from this. Practitioners might argue that it is the capacity of the patient as well as the needs of the therapeutic situation which will often determine the different ways of working.

2.3 Training Organisations in CPJA aim to provide theoretical and clinical trainings which reflect CPJA's core commitment to psychoanalytic theory and technique, alongside the development of professional competence and ethical standards in psychotherapy. Trainings are expected to comply with the general training **requirements and standards** of UKCP and the following generic criteria.

2.4 Labels

CPJA currently registers psychotherapists as:

1. psychoanalytic psychotherapist
2. psychodynamic psychotherapist
3. psychoanalyst
4. group analyst
5. group analytical psychotherapist
6. Jungian analyst- analytical psychotherapist
7. analytical psychologist
8. attachment based psychotherapist
9. educational psychotherapist
- 10.

Each training should make it clear in its statement of objectives which UKCP Register labels will apply to its graduates.

2.5 Each training should have a clear statement of its aims and philosophy and its specific requirements. The aims and philosophy should be in keeping with those of CPJA as expressed in the flag statement above, in particular with CPJAs psychoanalytic orientation. The requirements should fulfil at least the minimum requirements for training of both CPJA and UKCP.

3. Selection

3.1 The UKCP entry requirement is a first degree or equivalent. Training courses must state minimum requirements and criteria for selection clearly. These normally include:

- Experience in a relevant work area;
- One year of personal psychotherapy with an approved psychoanalytic or psychodynamic therapist prior to the commencement of the training. Organisations will need to decide when this year must be. This is because personal psychotherapy is seen as a most important component for becoming a psychoanalytic psychotherapist and therefore important for potential students to know this process of being a patient before entering the training process.
- Personal suitability for the training and the work;

3.2 Organisations must have an equal opportunities policy and not discriminate on grounds of age, sex, race, religion, disability or sexual orientation.

3.3 The CPJA training courses may have in place a policy of acknowledging and processing applications under the principles of Assessment of Prior Learning (APL), Assessment of Prior

Experiential Learning (APEL) and Credit Accumulation Transfer System (CATS). Such policies should include clear guidelines of application principles, criteria and assessment processes, including provision for appeal. Normally no more than 50% of any training should be achieved through the above schemes.

4. Course Components

An adequate training should have all the following components:

4.1. Theory

- 4.1.1 The length of the theoretical part of the course should be a minimum of four years part-time study. The course should not be less than 250 hours (not including an introductory year) and around 500 hours if tutorials, supervisions, time spent in library, group, observations, etc. are counted. This is roughly equivalent to a part-time MA in terms of the course and it should be roughly equivalent in terms of academic standards.
- 4.1.2 The course should reflect the centrality of psychoanalytic thinking and practice, and the particular form of psycho-analytically based psychotherapy taught. It should make clear the core theoretical stance of the organisation. We recognize that trainings need to reflect the philosophy and practice of their organisation, and therefore need to keep a balance between making psychoanalytic core theory central to their training alongside modules reflecting their special ways of practice.
- 4.1.3 The trainees should work on original texts and through presentations and written work, or other comparable means, demonstrate a grasp of theory and its relevance to clinical work. A capacity for critical appraisal of theory should be developed.
- 4.1.4 Training should include a sufficient understanding of research developments within the field of psychotherapy. this should include a critical understanding of the relevance of studies and research on research findings in human development, psychopathology, sexuality, ethics and social science. Trainees should acquire a basic understanding of research techniques and their application to the investigation and evaluation of psychotherapeutic interventions from assessment to ending of treatment. This imply that training should provide sufficient opportunities for their students and trainees to develop the capacity for a basic understanding of different approaches to research in psychotherapy practice; a capacity to critically understand a research report in relevant clinical and professional journals; a capacity to evaluate the significance of research findings with respect to practice and a working knowledge of research findings in relation to assessment for therapeutic intervention and a capacity to critique these.

4.2 Placements

- 4.2.1 **Psychiatric Placements** offer trainees who do not come from a mental health background an opportunity to recognise severe disturbance and develop knowledge of the role and contribution of other mental health professions. Such placements are a requirement and can be arranged at any stage of the course and should normally be part time over at least six months.

- 4.2.2.** Some training organisations require, or offer, an opportunity to participate in infant observation courses, residential and non-residential work in therapeutic communities, research leading to a Masters Degree or work in a low-cost clinic. CPJA encourages these activities as long as they fit the approach of the training and it is made clear to trainees whether or not they are optional and what part they will play, if any, in the final assessment.

4.3 Personal Therapy

- 4.3.1 Trainee therapists need to obtain as full an understanding as possible of unconscious processes in order that they can be of greater value to their patients. This involves to be able to work “in” the transference, to “develop the capacity to be an object for the patient so as to receive and be open to the projections and transference issues from the patient’s internal world and to hold, maintain, observe, reflect and interpret from this” (taken from the WPF’s definition of a psychoanalytic psychotherapist). Personal therapy is a potent means of advancing this understanding. We believe that individual, couple and group psychoanalytic psychotherapy are treatments “in depth”. The requirements for personal therapy must, therefore, be appropriate to the aims of the course. Trainees should be in an appropriate psychoanalytically based psychotherapy for about twelve months before the commencement of the course, throughout the duration of the training and for as long as necessary after graduation. Organisations within CPJA differ in the way they define the ‘depth’ of a treatment. Some see it as directly related to the frequency of sessions while others take it to mean the relation of the interpretation to unconscious material. Overall it is the ability to create a space for entering the process of ‘being in therapy’ (or being a patient) Accordingly, CPJA agreed that the frequency of a training therapy/analysis should be decided by the needs of the trainee and the appropriate approach. . This may take the form of a prescribed frequency, of sessions of variable length or of varying frequencies.
- 4.3.2 In 1992 and 1999, however, CPJA adopted the convention that ‘not less than twice weekly therapy for trainees’ should form the outer parameter of acceptability with CPJA. In 2010 this has been changed to be a recommendation. There have been trainings within CPJA where personal psychotherapy has normally been not more than once a week, or held within monthly block trainings. The rationale for this is largely to do with the particular form of therapy offered (educational psychotherapy and working within the NHS), or the potential lack of availability of therapy on offer (twice a week group psychotherapy) As we believe that more frequent psychotherapy for trainees will more likely provide the space needed for entering this process of ‘being in therapy’, we ask training organisations to communicate clearly in their documentation the importance of personal psychotherapy, and to assess trainee’s needs of frequency accordingly.
- 4.3.3 Training organisations might also consider the provision of group psychotherapy or an experiential group for trainees as part of this process. The training therapy should be with an approved psychoanalytic or psychodynamic individual, couple or group psychotherapist, as appropriate.
- 4.3.4 A clear boundary around the personal training therapy is necessary. The training therapist should not be in the position of supervisor or tutor, or other position of organisational responsibility for their analysands. Opinions and experience differ about the analyst as teacher but in all arrangements the priority of the therapeutic process must be safeguarded

(see Appendix 1. Training organisations should pay attention to the choice of training therapists and have a clear policy about their selection.

4.4 Supervision

- 4.4.1 Trainees must be in personal weekly individual or group supervision from the time that the trainee is deemed ready to take on training cases and throughout the period of the clinical component of the training. Supervisors should be experienced practitioners and approved by the training organisation.
- 4.4.2 The question of clinical responsibility of patients needs to be given great care, and included in a formal agreement where the clinical work is undertaken and supervised in another agency. Where two different supervisors (or consultants) are involved it is essential that the training organisation has a clear and written agreement with the placement organisation about the roles and responsibilities of the two and hence their relationships with the trainee. This document should also spell out the communication required between the two supervisors, and it should be made clear to the trainee where clinical responsibility for his work lies. If this is held within the placement we suggest that any 'in house' case discussion should not be called 'supervision'
- 4.4.3 Most training courses require two supervisors in the course of the training, though one of these may be within a group supervision. Each training case should be supervised individually and separately. The supervisors will supply written reports to the training body at regular intervals, but not less than yearly. Training cases should be supervised for the duration, or until qualification. Departures from this practice should be related to the aims and objectives of the course.

4.5 Clinical Work

- 4.5.1 Clinical requirements will relate to the aims of the course and future practice of the trainees. It will mostly take the form of two supervised training patients or groups or couples, for not less than a minimum of 18 months, though organisations may require a longer period of supervised work. The frequency will also be in keeping with the stated aims of the course. For group trainings, the second training group need not be a dedicated therapy group and could be time-limited and/or theme focused.
- 4.5.2 Other clinical work, and in particular individual work with patients for group-analytic or couple psychotherapy trainees, may also be supervised and assessed but not to the exclusion of the long term work (it may include specialised work such as crisis intervention, short term work, assessment, etc.).
- 4.5.3 Students will be expected to provide reports, written or oral, (usually six monthly) and to make presentations based on their clinical work.
- 4.5.4 A specified number of assessments may be carried out and supervised.

4.6 Clinical seminars

- 4.6.1 For individual trainings, clinical seminars should begin at least from the time that a trainee has clinical cases and will continue throughout the training. Their purpose is to provide the opportunity for trainees to present and discuss their work together.

4.6.2 These seminars will be led by experienced practitioners trained in the appropriate speciality who will help trainees understand their work and to link it to their theoretical studies. Seminars will also provide an opportunity to look comparatively at different theories and therapeutic approaches. These seminars may provide a forum for linking issues such as outcomes, boundaries, ethics, and legal and practical aspects of clinical practice if they are not covered in other parts of the training programme.

4.7 Tutorial/Advice

4.7.1 Trainees should have a tutor/advisor to guide them during the training, to liaise with the Training Committee, and to assist in dealing with appeals and other personal difficulties. The tutor will also provide a bridge between the different components of the course. Organisations use tutors in a variety of ways and the role of the tutor should be made clear to trainees from the outset.

4.8 Ethical Code and Grievance Procedures

4.8.1 Trainees must be familiar with, and abide by, their organisation's Codes of Ethics and Practice. These must be in keeping with UKCP requirements and the practice of psychoanalytically based psychotherapy with individuals, couples or groups. These Codes, together with documents setting out clearly the mechanisms for dealing with complaints and grievances both from the public and from within the organisation, must be easily available to the public. All trainees, from the inception of their clinical work, must have professional indemnity insurance.

4.8.2 Each organisation must have a Code of Practice for Training Organisations and Trainees in accordance with UKCP requirements. The Code should be available to all trainees and should clearly set out the mechanisms for making and dealing with the complaints and grievances of trainees.

4.9 Safeguarding

4.9.1 There is a duty to report safeguarding issues to the local authority. Training Organisations should familiarise themselves with relevant legislation and procedures addressing the protection of the vulnerable adults from abuse. A vulnerable adult is a person aged 18 years or over: who is or may be in need of community care services because of their mental or other disability, age or illness and who is or may be unable to take care of himself or herself, or unable to protect himself or herself from significant harm or exploitation (see appendix 2).

4.9.2 Everybody who works with, or who has contact with children, parents and other adults, should be able to recognise and know how to act upon evidence that a child's health or development is, or may be, being impaired or the child is suffering or at risk of suffering significant harm (see appendix 3).

4.10 Assessment

4.10.1 Each trainee's progress should be assessed throughout the period of training. Assessment should include the theoretical and clinical aspects of the training, an assessment of how well the trainee is coping with the course and ultimately an assessment of the trainee's readiness

for the responsibilities of a professional psychotherapist. Each organisation must clearly state its criteria and procedures for assessment and final qualification, as well as the route to the UKCP Register.

- 4.10.2 Training organisations must be able to demonstrate that the input to their trainings in terms of core curriculum, observational standards, supervised clinical work and personal therapy relates to the Standards of Proficiency in Psychoanalytic Psychotherapy on page 9. These are deliberately brief but complex statements which are not directly assessed as such but attestation that the trainee has achieved them will be a logical consequence of the trainee having satisfied the assessment for all the coursework completed in each year of the training.
- 4.10.3 It should be clear where the authority is held for monitoring the trainees' development and for ultimately conferring a qualification. This is usually done by the Training Committee in consultation with teachers, supervisors, external teachers and sometimes with a trainee's input. Reports should be openly discussed with trainees who should be able to appeal an unfair assessment. Trainees should not be assessed by their own therapists. Training organisations must be clear about all the modes of assessment being used and must provide written statement of them in their guidelines.
- 4.10.4 The final assessment should involve a substantial presentation of the trainee's work which normally takes the form of a written paper, usually with both clinical and theoretical elements. For some schools this paper should also make links to insights from the personal psychotherapy. This should be a substantial dissertation length paper, or its equivalent, formally presented and referenced. Training Organisations must make provision for external assessment or validation of the qualification and graduation.

4.11 Teachers

- 4.11.1 There should be a clear policy about the choice/selection of teachers, usually based on their qualifications, experience, professional reputation and ability to teach.
- 4.11.2 There should be a method of assessing the quality of the teaching through feedback from colleagues and trainees.

4.12. Structure

- 4.12.1 Each Training Organisation should have a clear and coherent management structure in which both the authority for, and the accountability of, the training are identified. This structure should make clear how the various components of the training are overseen, questioned and changed, and how the Training Committee is appointed or elected and what are its duties and powers.
- 4.12.2 All information regarding the course, including information on the management structure and matters of formal and informal questioning and complaint should be contained within a Trainees Handbook which should be made available to all trainees and all concerned in the training as teachers, supervisors, training committee members etc.
- 4.12.3 Each Training Organisation should also have a clear and coherent constitutional structure which enables it to carry out its training tasks and where responsibility for the different functions can be easily identified. The trainees should have a voice through representation

on committees and by personal feedback.

4.13 Continuing Professional Development

- 4.13.1 Each Training Organisation should make provision for an ongoing graduate body either as an integral part of the organisation or clearly linked to it. Training organisations should encourage their graduates actively to consider their continuing professional development needs and may choose to draw up a formal programme providing, for example, opportunities for further study, clinical supervision, workshops, seminars, conferences and discussion of clinical work. Continuing professional development may be undertaken in association with other Organisational Members of CPJA. It should be clear to trainees what paths are open to them for membership of the organisation following their training.
- 4.13.2 Organisational Members should consult both UKCP and CPJA policies for continuing professional development to ensure compliance with these requirements. Refer to Appendices 1 and 2 of this document.

October 2012

Mapping of Standards of Proficiency which distinguish Psychoanalytic Psychotherapy

STANDARDS OF PROFICIENCY IN PSYCHOANALYTIC PSYCHOTHERAPY

Preamble

Psychoanalytic psychotherapy is one, distinct modality of psychotherapy stemming from various traditions within psychoanalysis and analytical psychology.

Psychoanalytic psychotherapists are those who have trained and qualified with Organisational Members of the UKCP's CPJA, or the BPC (British Psychoanalytic Council). Voluntary Registration as it exists currently implies formal accreditation of the registrant practitioner's training and qualification as a psychoanalytic psychotherapist; the registrant working to agreed codes of ethics and practice; and monitoring of the registrant's continued professional development.

The generic term 'psychoanalytic psychotherapist' is used in this context to cover practitioners who are psychoanalytic psychotherapists, analytical psychologists- Jungian analysts, psychoanalysts, group analysts, group psychotherapists, child psychotherapists, attachment based psychotherapists, couples psychotherapists, disability psychotherapists, educational psychotherapists and psychodynamic psychotherapists.

Clinical competence as a psychoanalytic psychotherapist draws on a large body of theory founded on the work of Sigmund Freud and developed, elaborated and critiqued by numerous other theorists for over a century notably Jung, Klein, Lacan, Winnicott, Bion, Foulkes and Bowlby. At the core of this theory is an understanding of the mind that assumes the central importance of unconscious mental processes, both individual and collective, in human behaviour, affect and relationships. From this basic perspective about the nature of the mind, psychoanalytic theory has developed its particular approach to the understanding of human development, psychopathology, mental health and individuation, and the processes of integration of the personality. From Freud's original concerns with unconscious conflict and Jung's with archetypes and complexes, the discipline has grown to encompass the theories of object relations, attachment, individuation and separation and the development of the self.

Psychoanalytic understanding of human growth and development has interacted with and continues to learn from many other disciplines, including the arts and humanities, as well as pure and applied science and social science.

Knowledge, understanding and skills

3a: Registrants must:	
3a.1 know the key concepts of the <u>arts, humanities</u> , biological, physical, social, psychological and clinical sciences which are relevant to their profession-specific practice	2.1.1 Identify appropriate knowledge bases for use in the therapeutic process <ul style="list-style-type: none">✚ Have a rigorous, critical knowledge and understanding of the psychoanalytic theories which inform the specificity of the practitioner's clinical practice✚ Critically evaluate the theories of other psychoanalytic schools and the historical relationship between them

- ✚ Recognise contemporary contributions to psychoanalytic theory, including the philosophical assumptions that underpin them.
- ✚ Identify the key concepts of primary psychoanalytic theory as they relate to individuals, couples and groups, most specifically those relating to conscious and unconscious processes, transference and resistance as the cornerstones of psychoanalytic treatment.
- ✚ Have a working knowledge of contemporary psychoanalytic theories about human growth and development
- ✚ Critically evaluate the role of culture in conscious and unconscious processes

2.1.2 Apply a theoretical model

- ✚ Critically evaluate differing psychoanalytic models of the mind and developmental theories in the context of clinical practice
- ✚ Understand psychopathologies using the key concepts of psychoanalytic theories
- ✚ Manage breaks, boundaries and endings with an appropriate understanding of their dynamic significance
- ✚ Use psychoanalytic concepts to generate hypotheses and develop appropriate responses to clinical problems.
- ✚ Evaluate risk in the clinical context and balance it against potential therapeutic gains
- ✚ Value practitioner's own negative capability and that of patients

2.1.3 Make use of theoretical model(s) to develop own practice

- ✚ Use an understanding of conscious and unconscious process discriminatingly in working with clients in a range of clinical settings, time-frames and intensities of therapeutic experience
- ✚ Draw on an in-depth knowledge and experience of practitioner's own psychological world through substantial personal psychotherapy as a key resource in clinical work

<p>3a.2 know how professional principles are expressed and translated into action through a number of different assessment, treatment and management approaches to practice, <u>and how to select or modify approaches to respond appropriately to the needs of the individual</u></p>	<p><i>2.2.2 The planning and progress of the treatment are consistent with the theoretical model</i></p> <ul style="list-style-type: none"> ✚ Assess and employ optimum clinical conditions for psychoanalytic work in different clinical settings, with different clients and different psychopathologies, including severe and enduring psychiatric illness ✚ Formulate models of psychotherapeutic change which draw on the psychoanalytic knowledge base described ✚ Assess and employ a range of psychotherapeutic interventions which draw on the psychoanalytic knowledge base described ✚ Identify the particular ethical implications of psychoanalytic work under conditions of regression, resistance, transference and countertransference <p><i>2.2.4 Application of the model is relevant and appropriate to the client</i></p> <ul style="list-style-type: none"> ✚ Assess clients for their suitability for psychoanalytic psychotherapy, taking account of their psychopathology and psychological-mindedness ✚ Be aware of the limitations of psychoanalytic psychotherapy and inform patients of other models of treatment where appropriate ✚ Value cultural, gender, ethnic, religious, ability and age diversity and adapt practice to patients' experience within this diversity
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Criteria for Accrediting Organisations [to be reviewed]

Distinction between Listing and accrediting organisations.

Listing Organisations are 'licensed' by UKCP to maintain people on the register. This means they can only re-register individuals who were originally placed on the register by a UKCP Training or Accrediting Organisation. The Listing Organisation can maintain the registration and needs to have CPD criteria and re-registration and re-accreditation protocols that fit the CPJA and Core requirements. It cannot renew a membership that has lapsed for many years or first register someone.

Accrediting Organisations are 'licensed' by UKCP to operate a procedure capable of assessing individuals who have not completed a UKCP Training course and are able to demonstrate 'equivalence' of CPJA's requirements.

Accreditation applies to:

1. Registered Psychotherapists trained by organisations in other Colleges of UKCP.
2. Persons trained by UK organisations, which are not members of UKCP.
3. Persons without a formal training.
4. Persons trained by organisations outside the UK.
5. Persons trained by approved organisations in the CPJA

Accreditation procedures do not apply to registered members of other existing training and accrediting organisations in the Council for Psychoanalysis & Jungian Analysis.

1. An accrediting organisation must be:
 - a. a recognised training organisation accrediting its students, at the completion of their training, for the Register;
 - b. a recognised training or non-training organisation which has adequate mechanisms for the assessment of the learning and clinical experience of someone for the purposes of making them a professional member of that organisation and putting them on to the Register.

An Accrediting Organisation must therefore satisfy the CPJA's Criteria for Training or Non-training Organisations.

2. An accrediting organisation must use the CPJA's Criteria for training when assessing individuals for professional membership or for UKCP registration.
3. There should be a clearly set out assessment procedure:
 - a. applicants should be interviewed in person;
 - b. references should be verified.
4. Accreditation should make the applicant a member of an organisation, to which they owe a professional responsibility.

Notes: The procedure is not applicable to persons who are already on the UKCP Register via the Council for Psychoanalysis & Jungian Analysis. ALL other persons need to go through an Accreditation procedure as set out.

Criteria for Listing Organisations

Distinction between Listing and accrediting organisations.

Listing Organisations are 'licensed' by UKCP to maintain people on the register. This means they can only re-register individuals who were originally placed on the register by a UKCP Training or Accrediting Organisation. The Listing Organisation can maintain the registration and needs to have CPD criteria and re-registration and re-accreditation protocols that fit the CPJA and Core requirements. It cannot renew a membership that has lapsed for many years or first register someone.

Accrediting Organisations are 'licensed' by UKCP to operate a procedure capable of assessing that individuals who have not completed a UKCP Training course are able to demonstrate 'equivalence' of CPJA's requirements.

1. The aims and philosophy of the Listing Organisation should be compatible with CPJA's flag statement. If other forms of therapy are practised by members of the organisation, the psychoanalytic, Jungian and psychodynamic elements should predominate if the organisation is to be a full member of CPJA.
2. The criteria for professional psychotherapy membership of listing organisations should be clearly spelled out, and such membership restricted to suitably trained psychotherapists.
3. The Listing Organisation will ensure, when clinical or referral services are offered that adequate assessment and supervision services are provided.
4. The Listing Organisation will ensure that accurate information about the nature of the service is available to other professionals and to the public.

The Quinquennial Review Process: A guidance note for visitors and organisations

Preamble

The Constitution of CPJA allows for three kinds of Organisational Members:

1. Training OMs which shall be organisations which provide training in psychoanalytic, psychodynamic or Jungian analytic psychotherapy that meets the CPJA criteria for training and have been accredited by the CPJA Membership and Training Standards Committee.
2. Accrediting OMs which shall be organisations which meet the CPJA criteria for accrediting organisations and which have been accredited by the CPJA Membership and Training Standards Committee.
3. Listing OMs and Special Interest Groups which shall be organisations of which the Registrants meet the requirements of the organisational membership of the CPJA and which neither trains psychotherapists nor seeks to place psychotherapists on the UKCP register and which has been accredited by the CPJA Membership and Training Standards Committee.

In addition there are some organisations that are both training and accrediting.

The purpose of the review process is to ensure that all Organisational Members conform to both UKCP and CPJA standards in respect of constitution, ethical practice and training and that they fit, in terms of their philosophy and aims, within the CPJA and conform to its flag statement. All organisations are scrutinised by their peers:

- on application to join the CPJA;
- on application to change their status within the CPJA, e.g. from a listing to a training organisation;
- and then approximately every five years.

The scrutiny and review is undertaken by representatives from two OMs operating through the CPJA Training Standards & Membership Committee (TS&MC) and Ethics Committee.

The review involves both the submission by the organisation of the UKCP's QR questionnaire documentation on constitution, structure, procedures, courses, codes of ethics etc. and an on site visits to the organisation. The visiting team then prepares a report of the OM to submit to the TS&MC. The CPJA Ethics Committee prepares a report on the OM's ethical codes prior to the visit being undertaken so that any issues arising can be addressed alongside the visit.

The Quinquennial Review process is held jointly by the CPJA and UKCP. The CPJA holds it through the Training Standards & Membership Committee (TS&MC) and the Ethics Committee, while the UKCP Organisational Membership Committee (OMC) holds the UKCP element. The TS&MC is responsible for reviewing the report of the visit and will make a recommendation to CPJA delegates as to whether the OM should be accepted as a member of CPJA/should be allowed to continue as a member of CPJA.

Organising the Quinquennial Review

From January 2011, OMs to be visited will be contacted at least 6 months before the visit is due. This means that OMs will have plenty of notice of the forthcoming QR visits and the months that these are due to take place.

The Role of the TS&MC

- Establishes annually which organisations are due for a visit, confirming the programme with UKCP
- Organises the Quinquennial Review process.
- Holds a record of visits undertaken and to be undertaken
- Identifies two visitors from different OMs to undertake the visit. Where possible one of the visitors selected to carry out the QR visit will be from an OM of similar orientation and practice to the OM to be visited.
- The visiting team consists of the two visitors and the UKCP Quality Assurance and Registration Manager (currently Alan McConnon alan.mcconnon@ukcp.org.uk and 020 7014 9964.)
- The CPJA Administrator holds contact details for all delegates and will monitor progress of the programme of visits.

Role of the UKCP Quality Assurance and Registration Manager

The Quality Assurance and Registration Manager at UKCP will confirm the programme put forward by TS&MC and will send out the generic questionnaire to OMs prior to the visit. The generic questionnaire will be sent with a covering letter including a note on CPJA's requirement regarding the information to be provided, the CPJA's Criteria for Training and QR visit guidance notes.

OMs are required to send 4 copies of the completed questionnaire and the QR submission documents (as required in the guidance notes) to the QA and Registration Manager at least 8 weeks before the date of the questionnaire. The QA and Registration Manager will check that the questionnaire has been completed and that the supporting documentation has been submitted and will send a copy to each of the visitors.

The Role of the CPJA Administrator

- To agree the date for the visit: the administrator will liaise with the OM to agree a number of possible dates for the visit. The administrator will contact Alan McConnon to confirm availability of the UKCP representative and confirm the date of the visit.
- To liaise with TS&MC Chair to identify convenor and a second visitor to undertake the visit on the agreed date.
- To identify the contact at the OM who will lead on the QR visit and request the ethical documentation from the OM to forward to the Ethics Committee at least 6 months before the QR visit. This will enable any issues with the ethical documentation to be identified prior to the QR visit.
- To liaise with the CPJA Ethics Committee, which will consider the Ethics and Grievance Procedures of the OM, to ensure that a report is provided to visitors and TS&MC of the outcome of the review of ethical documentation at least 8 weeks before the date of the visit. This check is an important part of the QR process, without which the review cannot be completed.
- Where the OM works with children the Standards of the Faculty for the Psychological Health of Children will be included in the documentation provided to visitors.
- Writes to the Chair of the OMs scheduled to be visited to let them know the composition of the visiting team and sends them copies of the relevant procedure for the visit (Training,

Accrediting) plus the CPJA Training Standards Criteria; in the case of a former AP-PP Section OM the CPJA criteria are also sent out; all relevant documentation can be consulted at any time on the delegates' website.

- Writes to each of the delegates acting as visitor, giving details of the review to be undertaken, and copying to them correspondence which has been sent to the Chair of the OM being reviewed; the delegate letter is copied to the Chair of the delegate's OM for information.
- Obtains a copy of the previous visit Report from the CPJA archive (or from the OM itself) where possible and ensures that the Convenor receives a copy of its *recommendations*, prior to the visit; the Report itself is not distributed to the visiting team, to leave them free to think afresh about the OM under review.
- Liaises with UKCP to ensure that the QR documentation is obtained from the OM within the timescale and is sent to the visitors and the Chair of TS&MC in advance of the visit. Documentation is sent by surface mail direct to the home addresses of visitors.

The role of the Convenor

One of the visitors will be designated as the Convenor of the QR visit and is responsible for the overall planning of the visit:

- Liaises with the OM to agree a timetable for the day
- Reviews the QR documentation as soon as it is received to check that all information is provided.
- Requests any further relevant documentation required from the OM, for example course advertising, the training handbook, syllabus, CPD procedures and programmes, any evaluative material collected by the training itself (for example trainee feedback on teaching); negotiates the content of the review day with all concerned
- 4 weeks prior to the visit: Discuss the QR documentation with the second visitor so that any issues of concern are identified before the visit. Where appropriate the convenor should alert the OM to any concerns before the visit so that they can be discussed during the visit.
- Ensures that the CPJA Administrator is kept informed of progress of the visit and advises of any difficulties encountered.
- Retains overall responsibility for the visit
- The Convenor is responsible for the production and submission of the visit report, although this can be delegated to the second visitor by prior agreement. The Convenor should agree with the second visitor how notes of the meeting will be taken.

Role of the Second Visitor

The role of the second visitor is to independently support the convenor in the organisation and process of the day. Normally, this includes taking notes and undertaking the preparation of the draft report, in consultation with the convenor. The final report is therefore a collaborative effort.

Preliminary Tasks of the Organisation to be Visited

1. The OM will provide the ethical documentation requested by the CPJA Administrator on request – the aim is for this to be done at least six months before the visit is due.
2. The OM will appoint an officer, normally the Chair of the Training Committee for Training Organisations, to be the OM's lead for the visit. This person will liaise with the visit Convenor over the practical arrangements for the visit. The name and contact details of this officer

should be notified to the CPJA Administrator as soon as possible on receipt of notice of the QR.

- 3 The OM will complete the QR questionnaire sent out by UKCP and will ensure that the responses provided cover all the headings set out in the CPJA's "Criteria for Training" Document . The response should provide evidence of how the organisation ensures that the training criteria are fulfilled in its accrediting procedures and practices. It should highlight changes and developments since a last visit and *specifically any changes made in response to the report of the last visit*. It is expected that the information provided will include as a minimum:
 - details of its structure and constitution, showing how the training is represented, governed and quality assured in/by the organisation;
 - the documentation/protocol used for the accreditation procedure. (It should be borne in mind that all Organisational Members accredit their trainees, once their training has been completed, by some internal procedure, whether they accredit external candidates or not);
 - a copy of the curriculum specification for the training (to include a description of the philosophy and aims of the training, a Course Handbook or other form of documentation appropriate to the MO, which shows the typical content of the training in a year by year format, the material used for advertising the training and/or made available to trainees, e.g. a Student Handbook, and an account of how the training is monitored and evaluated on an on-going basis (for example what type of evaluative material is collected and how used, and how criteria for the approval of therapists, tutors, trainers and supervisors are applied. It is useful to know whether CRB checks are in use.)
 - a copy of its Code of Ethics and Practice
 - a complaints Procedure which specifies how complaints made by trainees are dealt with.
4. The questionnaire and other documentation must be returned to UKCP at least 8 weeks prior to the date of the QR visit. You should send by registered mail or courier FOUR hard copies of the completed questionnaire and the supporting documentation to: Alan McConnon, [title], Edward House, 2 Wakley Street, to Alan McConnon, Quality Assurance and Regulation Manager, Edward House, 2 Wakley Street, London EC1V 7LT, clearly marked 'QR Documentation'. The OM is advised to keep a copy of the papers dispatched, so that discussions at the time of visit can refer to common papers. At the time the documents are sent to UKCP, an electronic version of the submission should be emailed to the CPJA Administrator at jane@nairne.com.
N.B. Where documentation is late or incomplete the visit is unlikely to be able to go ahead, as UKCP and CPJA both need time to read and consider it before the visit takes place.

Carrying out the visit

- It is helpful for the visiting team to hold in mind that they are representing UKCP, and that the delegates are representing the CPJA in particular, and not their own OM, for the purpose of the visit.
- It is also helpful to bear in mind that the *voluntary* Quinquennial Review process is a peer review – it is about one OM (as CPJA representative) visiting another OM, and sharing a common interest in the problems and possibilities that the work presents.
- It will be helpful for the visiting team to call to mind the skills and experience they bring to the visit. An analytic stance is often helpful, and is valued by the OM being visited. The team

may meet and need to contain varying degrees of anxiety and persecutory/defensive response. There will have been a previous visit in the memory of the organisation, as well as other history and cultural context. The visit will have involved the OM in a lot of preparatory work and time, and recognition of this is usually appreciated.

- It is often helpful to keep the vantage point of the trainee/candidate in mind in considering a training or accrediting process. Though theirs is not the whole story, the process is provided for the benefit of the trainee/candidate in the first instance, and no one holds the whole experience of training in mind except the trainee. Equally, no one group is likely to have a complete picture of training, but each will have a perspective which illuminates some aspect of the work.
- The team will want to facilitate the kind of dialogue where it is possible for all involved to think openly and creatively around the training, so that the visit is of real benefit to the OM in moving its own thinking on, and not merely experienced as a monitoring check.
- The team can however feel free to ask any questions that seem relevant to them, to check the standing of training providers where necessary, and to probe issues where they feel anything is not clear to them.
- The Convenor will have emailed/spoken to the second visitor before the visit, to help think about the documentation received and any ideas or questions that have arisen out of it; this can be helpful preparation to ensure that, within the limited time available, there is a fair focus on any issues of particular interest or concern.
- The Convenor meets the team on the day of the visit and in pre-arranged spaces throughout the day, to think about progress on the visit and gather perceptions, information and further areas to explore. Differing roles or areas of enquiry can be apportioned at these times.
- The Convenor is *not* necessarily responsible for facilitating all sessions and therefore may feel freer to ask interesting and challenging questions of his/her own.
- CPJA criteria are not applied inflexibly, but with thought; argument is requested where there is a departure from CPJA criteria; *all the criteria* are important – each heading represents an aspect of quality, which the CPJA has agreed.
- The team arranges for a brief verbal feedback session with the Training Committee at the end of the day where possible; it makes clear that this feedback is provisional and does not preclude the possibility of further feedback in the visit report.
- The Convenor is responsible for the production and submission of the visit report, although this can be delegated to the second visitor by prior agreement. The Convenor should agree with the second visitor how notes of the meeting will be taken.

The role of the Report Writer

- Ensures that the report logically follows the headings in the CPJA Criteria Document and that all criteria are addressed.
- Ensures that the report respects confidentiality and maintains appropriate boundaries among all the parties involved; individuals interviewed are not named.
- Ensures that the report offers both critical as well as positive evaluation
- Identifies any areas of divergence from the CPJA Training Criteria; these will need to be cogently argued by the visited organisation, and their views recorded, so that diversity is valued as well as being challenged. These areas may already have been negotiated as exceptions at previous Quinquennial Reviews, though this does not preclude their being discussed again during the current visit.
- Identifies any crucial divergence from the Criteria for Training both on the day and in the report, as these may prevent the Organisation remaining in the CPJA.
- Makes clear and specific recommendations as appropriate.

- Makes a clear statement at some point in the report as to whether the OM should continue as a member of the CPJA or whether there are conditions for continuing, spelling out what these are, with a reasonable time scale for their implementation. In the rare case of an OM being felt by the visiting team not to justify its continuing membership, the issues of concern should be discussed with the Chair of TS&MC before communication with the OM.
- Ensures that any areas of good practice that the team has identified are spelled out, as these might be helpful for sharing across the CPJA.
- Makes an explicit recommendation to the TS&MC that the organisational member passes, fails, or passes with conditions, its review.

Wrapping up the visit

- 2 weeks after the visit: the report writer circulates a first draft of a Report of the visit is prepared and circulated to the second visitor and Alan McConnon for amendment/approval
- Second visitor and Alan McConnon to respond within 1 week of receipt of first draft of report;
- Report writer to send second draft to CPJA Administrator who will circulate it to members of TS&MC. Chair of TS&MC to check that the report covers all training criteria – within 1 week of receipt of second draft.
- Second draft to be returned to report writer with any comments to be incorporated before it is sent to the OM.
- When agreed by the Chair of TS&MC, the Second Draft is submitted to the OM, with a covering letter requesting any factual corrections or additional information needed and not picked up by the visiting team; a deadline for response is given (2 weeks from receipt of report), after which the report will be assumed to be accurate.
- OMs under review may not, as a general rule, argue for a change in the report's recommendations at this stage, unless there has been a clear and mutually agreed misunderstanding by the visiting team about the nature of the OM's activities
- The Second draft is then finalised and submitted as soon as possible to the CPJA Administrator who will circulate to TS&MC.
- The visiting team claims expenses plus an honorarium. For QR visits to training and accrediting OMs the convenor will receive £150 and the second visitor £125. The report writer to receive an additional £100. For visits to listing OMs or for revisits both visitors will receive £100 and the report writer an additional £50. Expenses should be claimed from the CPJA Administrator – receipts or other evidence of expenditure will be required.

Completing the review

- At its next available meeting, the TS&MC considers the report together with any recommendations of the Ethics Committee, and endorses or amends the recommendations of the visiting team. It is the TS&MC that holds responsibility for passing, failing, or passing with recommendations the review of the organisational member.
- The Chair of the TS&MC reports the decision of the Committee to the CPJA for formal ratification.
- The Chair of TS&MC writes to the OM with the final decision, enclosing a copy of the final draft of the report.
- The Chair of TS&MC writes to the UKCP OMC, informing them of the outcome of the Review, enclosing a copy of the letter to the OM and a final draft of the report.

- The TS&MC holds the QR table, which is amended to show where each organisation stands in the UKCP process.
- The Final Report and letter to the CPJA Administrator to be filed in the CPJA archive.

Training Standards & Membership Committee
Reviewed November 2010 Updated May 2012

Procedure for Initial Assessment or Quinquennial Review of Training , Accrediting or Listing Organisations

Preamble

The CPJA has three kinds of Organisational Members:

- Training;
- Accrediting; and
- Listing.

In addition there are some organisations that are both training and accrediting. All organisations are scrutinised by their peers:

- On application to join the CPJA;
- On application to change their status within the CPJA, e.g. from a listing to a training organisation; or training to accrediting organisation
- And then approximately every five years.

The scrutiny and review is undertaken by Organisational Members' delegates operating through the Training Standards & Membership Committee (TS&MC) and the Ethics Committee. It involves both the submission by the organisation of documentation on constitution, structure, procedures, courses, codes of ethics etc. and on site visits to the organisation.

The process involves the submission of a report of the organisation to the TS&MC from the visiting team, and a report on the organisation's ethical codes from the Ethics Committee.

The TS&MC will then make a recommendation to CPJA on the acceptance and /or continuance of the organisation within the CPJA.

The purpose of the review process is to ensure that all Organisational Members conform to both UKCP and CPJA standards in respect of constitution, ethical practice and training and that they fit, in terms of their philosophy and aims, within the CPJA and conform to its flag statement.

Preparation

1. The CPJA TS&MC will draw up a list of organisations which have applied for Training Organisation status plus accrediting and training organisations, which are due for their quinquennial review. This list will be published on the CPJA website as early as possible in the QR year and the chair of TS&MC will write to the Chair of the OMs to advise that a visit is due.
2. In the case of a new applicant organisation, the TS&MC will appoint three representatives of the CPJA on the basis, as far as possible, of one representative from an Organisational Member (OM) that is like the OM to be visited, one unlike and one from a non training organisation. In the case of a quinquennial review visit, the CPJA TS&MC will appoint two representatives to conduct the review and visit. In either case, one representative will be appointed as Convenor of the visit, to be responsible for liaison with the other visitors and with the organisation to be visited. The UKCP will also be represented at all visits. In the case of a Training Organisational Member which wishes to become an Accrediting Organisation as well, the application will be reviewed by the TS&MC without a visit. This assumes that the OM

has satisfactorily passed its last review as a Training Organisation and any conditions then specified have been attended to.

3. The CPJA administrator (Jane Nairne) will be responsible for monitoring progress of the visit and will write to the chair of the OM to confirm the names and contact details of the two visitors. The Convenor will liaise with the UKCP nominated representative to ensure that commonly available dates are offered to the OM concerned. Negotiation of the date of the visit is normally possible within the agreed time frame for the completion of the visit.
4. The CPJA Treasurer will be informed by the Administrator of the planned visits and will collect the fees. The fee payable by New Applicant Organisations is currently £500. There is no fee for quinquennial visits currently, though all fees are under review.
5. The CPJA Ethics Committee will be informed by the Administrator of which organisations are due to be visited, so that the relevant Codes of Ethics can be scrutinised.

Preliminary Tasks of the Organisation to be Visited

1. The organisation will complete the UKCP questionnaire, using the headings of the CPJA's "Criteria for Training" Document (and if appropriate 'Criteria for Accrediting OMs', or Criteria for Listing OMs). The answers should provide evidence of how the organisation ensures that the training criteria are fulfilled in its accrediting procedures and practices. It should highlight changes and developments since a last visit and *specify any changes made in response to the report of the last visit*. Any departures from the CPJA training standards should be identified and explained.
2. The organisation will provide the requested information to the UKCP office within six weeks of the date of the notice from the CPJA of the QR:
This includes
 - an information pack with details of its structure and constitution, showing how the training is represented, governed and quality assured in/by the organisation; (this differs for Accrediting and Listing OMs where it is about training requirements)
 - the documentation/protocol used for the accreditation procedure. (It should be borne in mind that all Organisational Members accredit their trainees, once their training has been completed, by some internal procedure, whether they accredit external candidates or not);
 - (not for Accrediting or Listing OMs) a copy of the curriculum specification for the training (to include a description of the philosophy and aims of the training, a Course Handbook or other form of documentation appropriate to the OM, which shows the typical content of the training in a year by year format, the material used for advertising the training and/or made available to trainees, e.g. a Student Handbook, and an account of how the training is monitored and evaluated on an ongoing basis (for example what type of evaluative material is collected and how used, and how criteria for the approval of therapists, tutors, trainers and supervisors are applied.
 - It is also important to know whether and how CRB checks are in use.
 - a copy of its Code of Ethics and Practice
 - a complaints Procedure which specifies how complaints are dealt with.

3. Four hard copies of the above documentation, suitably indexed so that their contents are clear and accessible to the visitors, should be sent to the UKCP office who will then distribute copies to the visitors. The OM concerned should keep a fifth copy for its own use, so that any issues arising from the documentation can be discussed on the day of the visit. N.B. Where documentation is late or incomplete the visit cannot go ahead, as UKCP and CPJA both need time to read and consider it before the visit takes place.
4. The organisation will appoint an officer, normally the Chair of the Training Committee (for Training OMs), to liaise with the visit Convenor over the practical arrangements for the visit. The name and contact details of this officer should be notified to the CPJA Administrator as soon as possible on receipt of notice of the QR.

Preliminary Tasks for Listing Organisations

1. A written report is required by the team visiting listing organisations which systematically addresses the questions below. The CPJA Training Standards and Membership Committee recommends that after receiving a written response to these questions from the organisation, the team should arrange to meet a number of members of that organisation; maybe some from its Governing committee or its equivalent, and one or two of its ordinary members. The questions will be followed up at the visit.
 - What are the aims and philosophy of the organisation?
 - What is the administrative structure?
 - How do they recruit their members; do they have different categories of membership and how are those decided?
 - What types of activities do they carry on as an organisation and what other activities of their members do they take professional responsibility for?
 - Has their code of ethics been examined and approved as meeting CPJA criteria by the CPJA Ethics Committee?
 - What structures are in place to deal with complaints?
 - Are other forms of therapy practised within the same organisation, and to what extent?
 - If the organisation offers a clinic or a referral service, what types of supervision, if any, is available?
1. Copies of the report and an information pack containing copies of the constitution, codes of ethics and practice and other relevant documents should be sent to the Visit Co-ordinator of the TS&MC and to each member of the team of visitors.
2. The organisation will appoint an officer, normally the Chair of the Council or Governing Committee, to liaise with the visit Convenor over the practical arrangements for the visit.

Arrangements for the visit

1. The Convenor of the visiting team will liaise with the organisation's appointed officer to establish a date for the visit and compile a suitable programme
2. The Convenor will inform the CPJA Administrator of the date of the visit.
3. The visit will normally last for a full working day, and for half a day at least in respect of an Accrediting Organisation. The programme should allow time for the visitors to confer together before, during and at the end of the visit; it should include a meeting with the senior officers of the MO, the Training Committee of the organisation, current trainees, and recently qualified members.
4. The programme should include an opportunity for the visiting team to feed back their initial response to the day to the host organisation. This informal feedback will be indicative and not represent a final decision at this stage as to the MOs having passed the QR.

After the visit

1. Using the CPJA "Criteria for Training" document (and if appropriate the 'Criteria for Accrediting OMs or Listing OMs) as a guide to its format, the visiting team will prepare a draft report on the organisation concerned within 4 weeks of the QR visit. This will include scrutiny and amendment where appropriate by the UKCP quality assurance officers and the CPJA Ethics Committee.
2. The focus of the report will be on the training process (or the accrediting process, or the process for listing) in terms of its philosophy, its standards and its effectiveness. All members of the visiting team should be aware of ethical issues and conversant with the organisation's Code of Ethics, but the CPJA Ethics Committee will scrutinise the detail of the organisation's ethical papers and make a final decision on its appropriateness for the CPJA.
3. *Before the report is sent to the OM for comment on accuracy, the visiting team should send a draft of the report to the TS&MC. Provision of a draft report in this way aims to ensure that any matters of concern to TS&MC are raised and discussed with visitors before the draft is sent to the OM being reviewed. TS&MC reviews all QR reports and therefore is in a position to consider the draft in the overarching context of the QR process. The report and its recommendations remain the responsibility of the visitors, TS&MC holds the responsibility for confirming whether the OM passes its review.*
4. The agreed draft report is then sent to the organisation to provide it with the opportunity at to notify the Convenor of the visit of any factual corrections and amendments to the report. The evaluative conclusions of the report cannot be altered at this stage, except in a case where the OM can show clearly that their procedures have been factually misunderstood or misinterpreted. The OM will have a 3-week period in which to report factual errors to the Convenor.
5. If no factual amendments to the Report have been received after 3 weeks, the TS&MC will consider the report and all relevant information and make a recommendation to the CPJA at its next available meeting, and to UKCP. They may recommend outright acceptance of renewed membership of an existing OM as appropriate, or they may recommend renewal of

membership subject to certain changes to the structure, composition and procedures of the training or, non-acceptance of the organisation concerned. The final draft of the report will be sent by the UKCP officer to the Chair of the OM, The report may be posted on the CPJA website, in the interests of openness and the provision of a means of sharing experience and approaches to training across CPJA.

New accrediting or training OMs will first have to apply to the UKCP Organisational Membership Committee (OMC) who will look at the application and then work with the relevant college on the approval of the application. The OM will then go through the process described above. Once approved by both, the recommendation will come to the CFC (College and Faculty Committee) for approval. Their recommendation will then go to the Board of Trustees who will have the final decision.

CPJA Responsibilities

1. CPJA will hold on file the QR documentation and Reports of the visiting teams on the Quinquennial Review of Training, Accrediting or Listing Organisations.
2. An honorarium of £100 is paid to each of the visitors and a further honorarium of £50 to the writer of the report. The travelling and clerical costs of the visiting team will be reimbursed and the claim submitted to the CPJA Administrator in the normal way.

**Reviewed September 2008 J. Barrett
And January 2012 A Golz**

Appendix 1

- 1 Training Organisations have interpreted the request for a clear boundary around personal psychotherapy in different ways, and some trainings have established a policy to consult the training therapist to say 'yes' or 'no' at certain stages of the training process.
- 2 The argument for this is that the therapist might be the only one who is able to form a view about the trainee's use of therapy, information which would not be otherwise available to the training organisation.
- 3 However, those who are against such involvement have argued that any 'gate keeping' function of the therapist will affect the trainee's ability – consciously or unconsciously – to enter into the process of being a patient and daring to expose vulnerable parts of themselves. They would also add that the trainee has the same right to confidentiality as other patients.
- 4 We therefore ask training organisations to reflect upon their policies with these thoughts in mind.

Appendix 2

Safeguarding Vulnerable adults

Abuse is behaviour towards another person that either deliberately or unknowingly causes the harm or endangers their life or human or civil rights. Abuse includes physical, sexual, psychological, financial and discriminatory abuse. Abuse may also be an act of neglect or omission. Abuse may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. It includes domestic violence and institutional abuse.

An individual, group or organisation may perpetrate abuse. Abuse can occur in any relationship. Abuse can occur between staff and users of a service. It may be a single act or repeated acts. Abuse ranges from poor quality care to causing someone's death. It is sometimes very difficult to identify abuse, which is on-going and subtle. Abuse can happen anywhere – including the person's home and within an organisation and institutions.

Appendix 3

Safeguarding Children

Safeguarding Children is a multi-stranded concept that reaches beyond basic child protection to incorporate the additional aims of preventing the impairment of children's health and development, ensuring children are growing up in circumstances consistent with the provision of safe and effective care, as well as protecting children from maltreatment. (1)

The UK Government has defined the term 'Safeguarding Children' as: ' the process of protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care'. (2)

This shift from the traditional child protection to a more all-encompassing approach was influenced by the first joint chief inspectors' safeguarding children's report (2002) and the Victoria Climbié inquiry (2003). (3) The every child matters programme outlined in the children's act (2004) formalised these changes into a legislative framework, aiming to improve outcomes for children in five key areas; being healthy, staying safe, enjoying and achieving, making a positive contribution and achieving economic well-being. (4)

The act also placed a duty on all agencies to make arrangements to safeguard and promote the welfare of children. To help achieve this the act made a number of institutional changes including the abolition of area child protection committees that have been deemed to have performed poorly in some areas by the joint chief inspectors' 2002 report and the formation of the multi-agency Local Safeguarding Children Boards (LSCBs). These consisted of representatives from local partner agencies such as housing, health, police and probation services. The LSCBs were charged with co-ordinating the functions of all partner agencies in relation to safeguarding children. They carry out this function by, among other things, agreeing the contribution of all member agencies and deciding how these pooled funds should be allocated. In addition they are responsible for commissioning independent serious case reviews and training member agency staff in safeguarding children best practice. (5) The working together to safeguard children (2006) document set out the ways in which organisations and individuals should work together to safeguard and promote the wellbeing of children. This was expanded the focus on interagency working to working together to safeguard children (2010), taking into account the recommendations of Lord Lamings 2008 report 'The protection of Children in England' which suggested it was imperative that frontline professionals get to know children as individuals.

The common assessment framework (CAF) is useful document for early identification of children's additional needs, and how to share information between organisations and to coordinate service provision. The CAF is not for children in need of protection. The findings from the CAF may give rise to concerns about a child's safety and welfare. Professionals should be particularly concerned about children whose parents are experiencing difficulties as a result of domestic abuse, substance misuse, mental illness and /or learning disability. All staff who have or become aware of concerns about the safety or welfare of a child should know:

Who to contact, in what circumstances and how; and

When and how to make a referral to children social care or to the police.

The CAF consists of:

A common process, to enable practitioners to undertake a common assessment and then act on the result;

A standard form, to help practitioners record and, where appropriate, share with others, their assessments and plans/ recommendation for support;

A pre-assessment checklist which practitioners may use to help decide who would benefit from a CAF. This should be completed when a professional in any agency has concerns that a child will not progress towards the five Every Child Matters priority outcomes (being healthy, staying safe, enjoying and achieving, economic wellbeing, making a positive contribution and achieving, economic wellbeing, making a positive contribution and achieving economic wellbeing).

The CAF covers three domains:

Development of the unborn child, infant, child or young person;

Parents and carers;

Family and environment.

And:

Enable the professional to identify the child's needs;

Provide a structure for systemic gathering and recording of information;

Record evidence of concerns and a base line for measuring progress;

Provide a framework for a referral discussion to children's social care for an initial or core assessment or to another service for a specialist assessment.

Completing a CAF provide a standardised written referral proforma referral.

Good practice note:

Where there is immediate need for a child protection assessment and response, professionals should contact the local children's social care directory and make a referral rather than starting or completing a common assessment.

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