

# College of Child & Adolescent Psychotherapies (C-CAP)

## Standards of Education and Training 2017

### 1. Introduction

This document defines the standards of education and training for the accreditation of courses for organisational members of the college.

#### 1.1 Titles and Descriptors

The College recognises two distinct qualification titles:

- Child Psychotherapist
- Child Psychotherapeutic Counsellor

An additional number of descriptors have been approved to indicate a particular focus of skill and knowledge.

These are:

- Child Counsellor
- Adolescent Counsellor
- Adolescent Psychotherapist
- Parent & Infant Psychotherapist
- Educational psychotherapist

The titles of Child Psychotherapist and Child Psychotherapeutic Counsellor, without descriptors, are generalist qualification titles, and denote a competence to work with the full range of ages in contexts of relevance.

Descriptors are both indicators of specialism and of 'limitation', in that their use denotes the qualification to work with a special age group or within a particular context. This document is arranged such that the core curriculum for all child practitioners is defined first, followed by the relevant additions for the different descriptors and titles. The use of titles and descriptors are therefore based on the achievement of specific knowledge and competencies. The changing and /or adding of descriptors can therefore only occur when the new competencies have been evidenced via formal learning or AP(E)L. This acknowledges both the specialism implied by the descriptor, and any resulting limitation in another area.

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## 1.2 Guiding Principles for Child Psychotherapy & Child Psychotherapeutic Counselling

These guidelines are informed by overriding principles which give recognition to:

- The child's individual human rights, including the right to self-determination, within the reasonable constraints of their need for safety, protection and care, in keeping with the law relating to Child Protection and the rights of parents and carers
- Given the right support and conditions, the capacity for the child to access impeded developmental impulses and re-establish the potential for psychological well-being
- The importance of considering the experience of children and young people in the context of the overall matrix of their lives and the centrality of family, social, cultural, religious/spiritual and political systems which frame their reality.
- The need to recognise the value and validity of a child's experience and to recognise the creativity and resilience of infants and children in responding to the circumstances of their lives as best they can within their developmental capabilities and emotional resources, even where this manifests in ways that present challenge and difficulty in the adult world, and to recognise that the child alone is not the problem
- The particular dependency and vulnerability of the infant, child and young person, emotionally, physically, psychologically and spiritually.
- The particular nature of the child's experience that characterises the several developmental stages and tasks involved in growing up into a mature relationship in the world
- The need to support children in developing the skills and resources they need to deal realistically with the circumstances of their lives, as well as to emerge more fully with their own potentialities and to build trust
- The multidisciplinary nature of work with children, and the vital importance of inter and intra-professional dialogue and exploration

## 1.3 Training Standards

The required curriculum defines a knowledge base and practical competence within the following categories:

- Child and Young Person Development
- Theories and Modalities
- Context Specific Competencies
- Therapeutic Communication, Relationship and Process
- Information Sharing
- Legal and Ethical Issues
- Multi-agency Working
- Special Educational Needs, Emotional, Social & Behavioural Difficulties & Issues of Mental Health
- Supporting Transitions
- Research and Monitoring
- Personal Skills & Qualities

The unique needs and vulnerability of children must be borne in mind at all times, and Training Organisation Members (OMs) need to ensure that practitioners who seek professional registration for work in this area maintain the highest standards of professional competence and personal skill.

Training OMs need to be aware of the rapidly changing legislation in this area, and need to develop processes to apply and integrate such changes into their training processes, and to ensure that they are able to support registered practitioners in the management of such changes.

## 2. Minimum Curriculum

The Learning Outcomes detailed in this section must form the basis of all trainings, and Training OMs must be required to provide evidence of the ways in which competence is achieved for each of these outcomes, whether training is in the form of a full and basic training, a conversion training, or an APEL procedure.

### 2.1 Child and Young Person Development

#### 2.1.1 Knowledge base:

- Child Development, including developmental stages and psychological, existential, cognitive, emotional and relational tasks
- The specific needs and vulnerability of the child as a result of their unique stage and level of development.
- Different forms of abuse and their impact on children's development
- The impact of transitions on child development
- Issues of attachment and the ways in which attachments form and change
- The role of play and self-directed play as a component of child development

#### 2.1.2 Practical skill and competence in:

- Working with children of different ages and developmental levels
- Recognising the signs of possible developmental delay

### 2.2 Theories and Modalities

#### 2.2.1 Knowledge base:

- Own therapeutic modality and issues this raises for work with children
- Other major modalities
- SEE SECTIONS 11.1 AND 11.2 BELOW
- Strengths and limitations of own modality

2.2.2 Practical skill and competence in a range of age-appropriate practical techniques & processes appropriate to own modality

## 2.3 Context Specific Competencies

### 2.3.1 Knowledge base:

- The position of the child or young person in the family or caring network, as well as the wider social context
- The key role and value of parents and carers and an appreciation of their support, information and advice needs
- The relative importance of peer- and community influence within different cultures
- The impact of adult functioning and mental health on the physical, emotional and mental health of children
- The roles and functions of the range of services involved with children & the relative effect of involvement of these agencies (education; mental health; social services; relevant voluntary services)
- Theories of attribution and range of factors that give rise to the difficulties experienced by young people

### 2.3.2 Practical skill and competence in:

- Working with parents
- Appropriate management of cultural difference and need, both within the therapeutic configuration, in family and in inter-agency work
- Work with children in a range of contexts (private practice; schools; NHS; other professional settings)

## 2.4 Therapeutic Communication, Relationship and Process

### 2.4.1 Knowledge base:

- The role and importance of body language in communication
- Barriers to communication
- Dynamics of power in relation to the therapeutic process with children
- SEE SECTIONS 11.1 AND 11.2 BELOW

### 2.4.2 Practical skills and competence in:

- Rapport building and the maintenance of an appropriate professional relationship with children and young people as well as with families and carers
- Appropriate emotional warmth, self awareness and personal emotional competence in the management of the therapeutic relationship
- Communication with young people in a manner appropriate to their cultural and social context and at their level of need and ability
- Appropriate written and oral communication using a range of media including electronic media
- Management of therapeutic boundaries of safety and containment
- Appropriate use of supervision
- Assessment of need & the development of a reasoned and substantiated proposal for treatment
- *SEE SECTIONS 11.1 AND 11.2 BELOW*
- Therapeutic decision making / evaluation skills / outcome management

- Maintaining the child at the centre of the therapeutic relationship while managing boundary issues
- Managing the range of conflicting demands of stakeholders in a manner that safeguards the therapeutic process
- Adapting strategies and techniques to suit the age, life stage, experience and context of the child
- Appropriate ending

## 2.5 Information Sharing

### 2.5.1 Knowledge Base

- The range of confidentiality procedures that apply in different contexts
- The process whereby the relevance, status and any gaps in information is determined
- The implication of the differences between different types of data (e.g. confidential information, personal data and sensitive personal data)
- When it is and when it is not necessary to have consent prior to sharing information

### 2.5.2 Practical skill and competence in:

- Obtaining information from a range of sources in an appropriate manner
- The use of the Common Assessment Framework for Children and young People (CAF), both as a source of information and to record information
- Ensuring that information transfers ahead of the child or young person, where appropriate
- Provision of timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person, parent or carer

## 2.6 Legal & Ethical Issues - Safeguarding and promoting the welfare of the child

(To be read in conjunction with the UKCP Guidelines for Sections for the Development of Codes of Practice and Professional Conduct for Working with Children")

### 2.6.1 Knowledge Base

- The concept of competence and the right to self-determination of the child or young person
- Rights of parents and carers
- The concept of harm and situations potentially harmful to children and young people
- The subtleties and signs of abuse in terms of affect and of physical, emotional, mental symptoms, as well as part of the therapeutic communication process (e.g. art and play situations)
- The laws and key policy areas related to children, including the most current legislation
- Government and local guidance policies and procedure and how they apply in the wider working environment
- The role and remit of the Local Safeguarding Children Board
- Data protection issues in the context of the therapeutic process
- Current legislation and the common law duty of confidentiality and legislation which specifically restricts the disclosure of certain information
- The difference between permissive statutory gateways (where a provision permits the sharing of information) and mandatory statutory gateways (where a provision places a duty upon a person to share information) and their implications for sharing information

- Variations in child protection procedures, legal frameworks and use of terminology across agencies
- Codes of ethics of UKCP & other relevant professional organisations
- Ethics relating to the maintenance of professional boundaries
- Implications of the use of medicines to treat mental and emotional conditions in children

#### 2.6.2 Practical skill and competence in:

- Supporting client self determination where appropriate, taking account of health and safety and child protection issues
- Formal and informal risk assessment
- Making considered judgements about how to act to safeguard and promote a child or young person's welfare
- Practical data recording, including the security and the legal requirements and guidance relating to the length of time for which records must be kept

## 2.7 Multi-Agency Working

### 2.7.1 Knowledge Bases

- Structures of support and operational and consultation processes within the personal working environment
- Local agencies and statutory and voluntary organisations involved in child, family and adolescent support work, and the nature of the work that they do
- Framework for decisions regarding case referral – both internal and external
- The range of professional terms, abbreviations and acronyms used within different agencies

### 2.7.2 Practical skills and competence in:

- Forging and sustaining respectful relationships across agencies
- Effective communication with other practitioners and professionals on an inter and intra- agency basis
- Operating effective cross-agency referral processes

## 2.8 Special Educational Needs; Emotional, Social & Behavioural Difficulties & Issues of Mental Health

### 2.8.1 Knowledge Bases

- Issues related to aggression, anger and violence
- The needs of children and young people with disabilities or special educational needs, including those in relation to transitions
- The range of Emotional, Social & Behavioural Difficulties
- SEE SECTIONS 11.1 AND 11.2 BELOW
- The effects of trauma, neglect and physical and sexual abuse
- The physical and psychological implications of the use of medicines to treat mental and emotional conditions in children

### 2.8.2 Practical skill and competence in:

- Appropriate response to conflict, aggression, anger and violence within the session, and also more generally in relation to children, young people and families
- Practical session and therapeutic process management in cases of Special Educational Needs, Emotional, Social & Behavioural Difficulties, Psychopathology and mental health conditions
- Exercising appropriate care in identification, diagnosis and therapeutic work in respect of cases of trauma, neglect and physical and sexual abuse

## **2.9 Supporting Transitions**

### 2.9.1 Knowledge Base

- The signs of difficulties associated with transitions of all kinds
- The likely impact of key transitions, such as divorce, bereavement, family break-up, puberty, move from primary to secondary school, unemployment, and leaving home or care
- Practical skill and competence in working with the full range of transition situations, in terms of managing information, providing support and undertaking a therapeutic process

2.9.2 Practical skill and competence in working with the full range of transition situations, in terms of managing information, providing support and undertaking a therapeutic process

## **2.10 Research and Monitoring**

2.10.1. Knowledge base and critical understanding (psychotherapeutic counselling)/ evaluation (psychotherapy) of recent and current developments in the therapeutic work with children and families

2.10.2. Practical skill and competence in monitoring & evaluation of therapeutic intervention through the use of appropriate methodologies

## **2.11 Personal Skills and Qualities**

- Responsibility, including an awareness of when to involve others, and where and how to get advice and support
- Appreciate the impact of the disclosure and management of upsetting situations the ability to access necessary support
- Appreciate own value and the value of others in a inter- and intra-agency context
- Practical creativity, flexibility, self-motivation, autonomy and ability to work proactively
- Skills of self-reflection
- Ability to respond professionally to challenge
- Maintain records of placements and periods of observation
- Ability to manage consequences of applied solutions
- Use supervision appropriately including evidence of understanding of the context of the child
- Appropriate emotional competency and emotional warmth in relation to children, including the capacity to explore and resolve personal issues arising from engaging in therapeutic work with children.



### 3. Theoretical and Philosophical Rationale of the Course

This must be a clearly articulated definition of the philosophical and theoretical rationale of the course. A coherent theoretical and philosophical approach must be reflected in all aspects of the course.

### 4. Selection and Admission Procedures

Training Organisational Members must outline Admission Procedures including:

- Entry requirements as per sections 11.1 and 11.2 below
- Number of places on the course
- Interviewing procedure
- Selection procedure including reasons for refusal

Training OMs must publish the specified standard of entry for child psychotherapy or child psychotherapeutic counselling courses and allow for accreditation of prior learning. Additionally, all training courses must have published criteria for the recruitment, acceptance and refusal of applicants, including published criteria for acceptance and feedback, and recommendations to those who are not accepted. These criteria must also be consistent with current UK Diversity and Equalities policy and relevant legislation. They should be congruent with UKCP standards for health for registration. The selection process must be face to face, usually in person.

Additionally Training OMs must have appropriate procedures in place to assess applicants' ability to undertake training at an appropriate level. All successful applicants must hold a clear enhanced CRB check upon acceptance of training.

The intensity of psychotherapeutic work with children makes it particularly important for Training Organisations to address the issue of personal emotional competence, resilience and personal resources. It is recommended that organisations be required to define the qualities that they consider essential for a child psychotherapeutic counselling trainee, and that this be part of any advertising material.

### 5. Assessment

- Each training course shall have a properly constituted body for the assessment of students and trainees.
- The modes of assessment, such as supervisors' reports, portfolios, written examinations, essays and writing in papers, and the criteria of assessment, must be clearly set out and made available to students and trainees.
- Assessment must be linked to clearly set out Learning Outcomes, both generic and college specific, relating to the knowledge base, clinical skills and the context of practice.
- The objectives of assessment are to ensure clinical competency within the context of a chosen theoretical model and sound ethical practice. The modes of assessment and the criteria for assessment must relate to these objectives.



- Assessment design must be fair to candidates and consistent across different orientations and training routes.
- There must be provision for the external assessment of both theory and practice by practitioners qualified and experienced in the theoretical model being taught.
- Students and trainees must be provided with sufficient regular feedback to allow them to assess their own strengths and developmental needs.
- Training courses shall have published appeal procedures in the event of disagreement over assessment.
- Assessment procedures should be designed to ensure that students and trainees can demonstrate fitness to practise as a psychotherapist.
- The methods of assessment used should measure the achievement of learning outcomes relevant to safe, effective practice as a psychotherapist.
- All assessment measures should be consistent with an effective and rigorous process through which it is possible to demonstrate compliance with external reference frameworks at Masters level or equivalent.
- Assessment for progression and measurement of performance for students and trainees should be an integral element of the wider process of evaluation, monitoring and development, and should employ objective criteria in addition to any relevant qualitative records.
- UKCP Training Organisations must be able to demonstrate how their systems and practices assure that relevant standards for assessment are in place, can be measured and are achieved.
- The expectations relating to a psychotherapist's role as a professional in relation to their practice must be embedded in the assessment processes for both theoretical and practice elements of training.
- Organisations should ensure that their handbooks or guidance documents clearly describe the assessment requirements for:
  - Progress within and between each stage of the programme;
  - Measuring achievement within the training;
  - Determining Fitness to enter the UKCP Register – including clarification that an aggregate award cannot provide eligibility for admission to the Register;
  - Clear procedures for students and trainees to appeal in relation to assessment procedures or outcomes, and through which students and trainees may raise matters of concern or complaint in relation to the assessment procedures or criteria or their operation;
  - The appointment of at least one suitably qualified and experienced external examiner (including relevant guidance to support appropriate contact by students and trainees with the examiner, where relevant).

## 6. Diversity and Equality

Training Organisational Members should demonstrate their commitment to processes that ensure equality of admissions and to encourage diversity commensurate with that found in society at large. Additionally, Training Organisational Members should provide evidence of the ways in which they seek to ensure that the skills and competencies relating to diversity and equality in work with children and young people form part of the ethos and ethical framework of both their training process and their organisational structure. In line with UKCP Standards of Education and Training, all trainings should include:

- A broad understanding of some of the key systemic hurdles affecting those, but not exclusively those, covered by the Equality Act 2010
- The contemporary and significant discriminatory discourses throughout trainings
- Raising awareness of conscious and unconscious bias
- Equipping students and trainees to work with clients across the diversity spectrum
- Equipping students and trainees to engage with their own fears and prejudices, and those affecting clients, re difference
- Arrangements to ensure that the students and trainees can identify and manage appropriately their personal involvement and contribution to the processes of the psychotherapies that they practice

## 7. APEL Procedures

Training Organisational Members must clarify levels of entry specify both the conditions under which Accreditation for Prior Learning (APL) and Accreditation for Prior Experiential Learning (APEL) apply and the procedures by which such claims are processed. In all cases the Learning Outcomes relevant to the title and descriptor must form the basis for training standards and AP(E)L procedures. Entry onto the UKCP Child Register is in all cases dependent on the evidenced achievement of these learning outcomes. Normally no more than 50% of any training should be achieved through this process.

## 8. Supervised practice of psychotherapy

Supervision of trainees and of qualified child and psychotherapists and psychotherapeutic counsellors must be in line with the UKCP Standards for Supervision as articulated in the C-CAP Standards for Supervision.

## 9. Qualifications and Registration

- Training organisations shall specify whether qualification coincides with recognition of candidates as eligible for Registration by UKCP.
- Where qualification and registration do not coincide, organisations are to specify what further professional development is required for registration.
- The definition of such further professional development might include considerations relating to the nature of supervision and the range, quantity and intensity of practice and/or study.
- Where qualification and Registration do not coincide, the process of assessment of readiness for Registration shall correspond in general to the requirements of Section 3 above.
- Training Organisations must demonstrate how the learning outcomes associated with their accredited training(s) support graduates in meeting the UKCP's and relevant UKCP College/Organisational Member standards of proficiency for registration.

## 10. Continuing Professional Development

- Training organisations shall bear in mind a commitment to life-long learning and the need for monitoring practice for the best protection of the public.
- Each training organisation should make provision for an on-going 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.
- Training Organisations must make provision for the continued professional development of their graduates.

## 11. Registration and Descriptor Categories

### 11.1 Child Psychotherapeutic Counsellor

Section 11.1 identifies the specific, differential learning outcomes and training requirements for Psychotherapeutic Counsellors. This includes Child Psychotherapeutic Counsellors with the descriptors *Child Counsellor* (SECTION 11.1.1) and *Adolescent Counsellor* (SECTION 11.1.2). It is important to note that these descriptors are also limiters, and psychotherapeutic counsellors may not work with client or age groups for whom they are not qualified and experienced.

In addition to the above requirements, Child Psychotherapeutic Counsellors (all descriptors, unless otherwise indicated) must achieve the learning outcomes and training requirements below.

#### **a. Entry Requirements:**

In line with UKCP standards, entry for psychotherapeutic counsellors can be at an undergraduate or postgraduate level of competence. Applicants will have achieved one of the following minimum entry requirements prior to training:

- Relevant professional qualification or equivalent
- 1<sup>st</sup> degree or equivalent
- Accreditation of prior learning (experiential and certificated)
- Disclosure and barring service clearance
- Evidence of a good command of written and spoken English (*disability and equalities exceptions / adaptations to requirement will always apply*).

#### **b. Learning Outcomes:**

Child Psychotherapeutic Counsellors must demonstrate a *critical understanding* of all identified *Knowledge base* learning outcomes. They must also demonstrate their achievement of the following additional outcomes (numbered in accordance with the relevant UKCP SETs):

### 2.2 Theories and Modalities

#### 2.2.1 Knowledge base and critical understanding of:

- c. The way in which the principles of psychotherapeutic counselling are applied within own therapeutic modality

## 2.4 Therapeutic Communication, Relationship and Process

### 2.4.1 Knowledge base and critical understanding of:

d. Relational dynamics for counselling

## 2.4 Therapeutic Communication, Relationship and Process

### 2.4.2 Practical skill and competence in:

h. Development of counselling hypotheses based on theoretical principles

## 2.8 Special Educational Needs; Emotional, Social & Behavioural Difficulties & Issues of Mental Health

### 2.8.1 Knowledge base and critical understanding of:

d. Factors that impact on emotional health and well-being

The nature, purpose and process of psychotherapeutic counselling as distinct from other types of intervention should also be explored

### ***c. Student / tutor contact hours***

In line with UKCP standards for psychotherapeutic Counsellors, full training needs to be 3 years part time. There should be a minimum of 450 student-tutor contact hours, excluding supervision and personal therapy hours.

### ***d. Written work and Assessment***

Assessment should be in the form of both formative and summative feedback and should include an evaluation of the personal qualities of trainees as these relate to their competence to practice. The nature of the assessment process should be clearly articulated, and should include details of the way in which individual achievement of learning outcomes will be assessed.

The assessment process should cover the following areas of competence:

- Personal qualities and emotional competence as relevant to psychotherapeutic counselling practice
- Achievement of specified learning outcomes
- Practical competence and skill as a child psychotherapeutic counsellor.

### ***e. Counselling Placement Settings***

The number of counselling placement hours must be specified in accordance with College principles for best practice and the specific needs of Children and Young People. For registration, students need to complete at least 450 hours of supervised clinical practice, of which at least 300 need to be with children and / adolescents in line with the registration descriptor. At least 150 hours of clinical practice with children must be completed whilst in training

Placement arrangements must fulfil the requirements described in the C-CAP Standards for Student Placements. Training OMs need to demonstrate how they ensure that students meet the required learning outcomes.

### ***f. Client Age Groups***

To achieve registration as a Child Psychotherapeutic Counsellor without descriptor, students must demonstrate their competence with children and young people up to the age of 18. Descriptor based requirements are specified below.

***g. Multi-disciplinary experience***

Information sharing and intra- and inter-disciplinary co-operation is key to successful work with children. Member training organisations must ensure that students obtain a thorough grounding in both the theory and understanding of good practice in multi-agency working.

***h. Personal Development and / or Personal Therapy***

Personal Therapy is an essential component of Child Psychotherapeutic Counsellor training. Students need to develop personal understanding of the particular relational dynamics involved in working with children and young people, the need for awareness of transference processes and the potential emotional cost of working in areas of great need, distress and deprivation. Additionally, work with children may re-activate individual childhood experiences. Trainees must be encouraged to enquire into and work with any unresolved issues relating to their own relationship with issues of dependency and the dynamics of power. Students on Child Psychotherapeutic Training Courses must therefore attend a minimum of 35 hours of personal psychotherapeutic counselling per year for the three years of their training, resulting in a total of 105 hours.

***i. Supervision***

Supervision must be at a ratio of 4:1 and 6:1 as relevant, and be arranged in accordance with the requirements outlined in the C-CAP Standards for Supervision with Children.

**11.1.1 Child Psychotherapeutic Counsellor (*Child Counsellor*)**

The descriptor “Child Counsellor” is used where the training and subsequent practice is exclusively with children aged 11 and younger. Training for Child Counsellors must meet all the criteria for Child Psychotherapeutic Counsellors, with the placement component focussing on children up to the age of 11.

**11.1.2 Child Psychotherapeutic Counsellor (*Adolescent Counsellor*)**

The descriptor “Child Counsellor” is used where the training and subsequent practice is exclusively with children aged 12 to 18. Training for Adolescent Counsellors must meet all the criteria for Child Psychotherapeutic Counsellors, with the placement focussing on young people between 12 and 18.

## **11.2 Child Psychotherapist**

In addition to the above requirements, training for Child Psychotherapist must meet the following criteria:

***a. Entry Requirements :***

In line with UKCP standards, entry for child psychotherapists is at a postgraduate level of competence. Organisational Members must assess applicants’ ability to undertake training at postgraduate level, and should normally include one or more of the following entry requirements:

- Relevant professional qualification or equivalent
- 1<sup>st</sup> degree or equivalent
- Accreditation of prior learning (experiential and certificated)
- Disclosure and barring service clearance
- Evidence of a good command of written and spoken English (*disability and equalities exceptions / adaptations to requirement will always apply*).

*b. Learning Outcomes*

Child Psychotherapists must demonstrate a *critical evaluation* of all identified *Knowledge base* learning outcomes. They must also demonstrate their achievement of the following additional outcomes (numbered in accordance with the relevant UKCP SETs):

2.2 Theories and Modalities

*2.2.1 Knowledge base and critical evaluation of:*

- c. The process of therapeutic change within chosen modality

2.4 Therapeutic Communication, Relationship and Process

*2.4.1 Knowledge base and critical evaluation of:*

- d. Transference & counter transference / relational dynamics

2.4 Therapeutic Communication, Relationship and Process

*2.4.2 Practical skill and competence in:*

- h. Development of a clinical hypotheses based on theoretical principles

2.8 Special Educational Needs; Emotional, Social & Behavioural Difficulties & Issues of Mental Health

*2.8.1 Knowledge base and critical evaluation of:*

- d. Psychopathology and mental conditions relating to children

*c. Student –Tutor Contact Hours*

In line with UKCP standards for Psychotherapists, full training needs to be 4 years part time. There should be a minimum of 600 student tutor contact hours, excluding supervision and personal therapy hours.

*d. Written work and Assessment*

Assessment should be in the form of both formative and summative feedback and should include an evaluation of the personal qualities of trainees as these relate to their competence to practice. The nature of the assessment process should be clearly articulated, and should include details of the way in which individual achievement of learning outcomes will be assessed.

The assessment process should cover the following areas of competence:

- Personal qualities and emotional competence as relevant to therapeutic practice
- Achievement of specified learning outcomes
- Practical competence and skill as a child psychotherapist

*e. Observation Studies*

Training in Child Psychotherapy must include periods of infant and child observation. Child Psychotherapists must undertake weekly infant and child observations for a period of two years, at least one of which must include the observation of an infant from birth through their first year of life. Training OMs must articulate procedures and protocols in line with best practice in the field, and to ensure the safety of both student and the mother and infant. Training OMs must provide support seminars and procedures for the support of students.



*f. Clinical Placement Settings*

Student Child Psychotherapists will need to undertake a minimum of 450 hours supervised clinical placement during the period of study in order to meet all the learning outcomes appropriately. Of these at least 300 must be with children and adolescents in line with the registration descriptor. Students must complete all clinical placement hours as part of their Child Psychotherapy training.

Students must undertake their clinical placement in more than one setting type, to include at least two of the following:

- Schools
- CAHMS or other NHS setting
- Voluntary sector
- Specialist placement (e.g. hospice)
- Local authority multi-disciplinary placement

For the general descriptor, students must demonstrate competence with the full client age range up to age 18. Training OMs must specify the criteria by which competence across settings and with the required age range is achieved.

Placement arrangements must fulfil the requirements described in the C-CAP Standards for Student Placements

*g. Client Age Groups*

The minimum curriculum for Child Psychotherapists specifies experience of working with a range of age groups. It is therefore necessary for Child Psychotherapists to demonstrate clinical competence with children and young people up to the age of 18.

*h. Multi-disciplinary experience*

Information sharing and intra- and inter-disciplinary co-operation is key to successful work with children. Member training organisations must ensure that students obtain a thorough grounding in both the theory and practice of multi-agency working.

*i. Experience of Mental Health Settings*

The curriculum must include the opportunity to gain experience of child mental health settings. Training OMs must specify the nature of the learning students need to achieve from the mental health setting, and how this will be assessed. Students need to undertake a child and adolescent mental health placement of minimum of 60 of hours as part of their training.

*j. Personal Development and / or Personal Therapy*

Personal Therapy is an essential component of Child Psychotherapist training. Students need to develop personal understanding of the particular relational dynamics involved in working with children and young people, the need for awareness of transference processes and the potential emotional cost of working in areas of great need, distress and deprivation. Additionally, work with children may re-activate individual childhood experiences. Trainees must be encouraged to enquire into and work with any unresolved issues relating to their own relationship with issues of dependency and the dynamics of power. Students on Child Psychotherapy Training Courses must therefore attend a minimum of 40 hours of personal psychotherapy per year for the four years of their training, resulting in a total of 160 hours.



### k. Supervision

Supervision must be at a ratio of 4:1 and 6:1 as relevant, and be arranged in accordance with the requirements outlined in the C-CAP Standards for Supervision with Children.

#### 11.2.1 Child Psychotherapist (*Adolescent Psychotherapist*)

The descriptor “Adolescent Psychotherapist” is used where the training and subsequent practice is exclusively with children aged 12 to 18. Training for Adolescent Psychotherapists must meet all the criteria for Child Psychotherapists, with the placement focussing on young people

#### 11.2.2 Child Psychotherapist (*Parent & Infant Psychotherapist*)

Specific requirements for this descriptor TBA

## 12. Post Qualifying Training

Post qualifying training in child psychotherapy or psychotherapeutic counselling, leading to entry onto the UKCP child register refers to training specifically designed for UKCP registered adult psychotherapists, who wish to achieve registration as child psychotherapists.

Entry onto the Child Register involves the achievement of all the standards articulated above. Training OMs who wish to deliver post qualifying training need to demonstrate how students meet these standards and achieve the specified learning outcomes.

Formal post qualifying training must meet all the requirements for Child Psychotherapy or Child Psychotherapeutic Counselling, as relevant.

Post qualifying training for **Child psychotherapists** must include the minimum of a 2 year taught component, and include:

- 300 hours student-tutor contact time
- 300 clinical supervision hours with children at a minimum ratio of 6:1.
- personal therapy of 40 hours per year, totalling 80 hours over 2 years
- infant and young person observations as specified for child psychotherapists 60 hour child and adolescent mental health placement

Post qualifying training for **child psychotherapeutic counsellors** must include the minimum of a 2 year taught component, and include:

- 300 hours student-tutor contact time
- 300 clinical supervision hours with children at a minimum ratio of 6:1
- personal therapy of 35 hours per year, totalling 70 hours over 2 years

## 13. Accreditation of Prior Learning

Training OMs can specify the extent to which accreditation of prior experiential and / or certificated learning can be applied in respect of individuals who wish to gain entry onto the UKCP child register.

Training OMs must develop a clearly articulated AP(E)L policy document in which it clearly states those elements of the training process for which it is prepared to accept AP(E)L, as well as the proportion of its approved training process against which such an application can be considered. AP(E)L procedures must be equitable while ensuring that standards in all areas of the training process are maintained.

Training OMs must define and publish details of their AP(E)L procedure. These should include:

- Conditions under which AP(E)L may be considered
- The nature of the evidence required for an AP(E)L claim
- The composition and qualifications of the body which will consider AP(E)L applications • Timescales within which applications will be processed
- Appeals procedures
- Costs associated with an AP(E)L