

## Accreditation Criteria

**Training modality: Psychodynamic Counselling**

**Patient group: Adult**

These requirements are considered to be a **minimum** and it is the case that trainings may include additional training elements, for example an Infant Observation, a third year of theory seminars, or further training cases.

### Selection of suitable candidates:

Applicants should:

- be evaluated in terms of integrity and suitability to undertake a course which involves work with unconscious processes
- have completed a suitable basic introductory course in counselling theory and practice
- Ideally, although not necessarily, have a background and degree in allied professions and be able to demonstrate an ability to work to a high academic standard.

### Duration of training:

A minimum of four years must be completed before qualification. At least three of the four years must consist of thirty weeks per year with three hours teaching per week. One year of any entry requirement course may be included in the four years.

### Training components:

- Academic teaching
- Clinical work
- Personal psychoanalytic psychotherapy



### **Academic Teaching:**

This should include theory seminars, workshops and clinical seminars, of not less than 360 hours. The theory seminar programme should last at least two years with a minimum of 3 x 10 week terms of 3 hours teaching per week.

The clinical seminar programme should last at least three years and until qualification.

Psychoanalytic and psychodynamic counselling theory is to be taught by experienced and knowledgeable practitioners and encompass a thorough grounding in theory and psychoanalytic thought and practice. A range of psychoanalytic approaches from the British clinical tradition as detailed in the *Theory and Practice Requirements* document must be taught, to enable trainees to develop a flexible and thorough understanding of the theory base and its clinical application to psychodynamic counselling.

In clinical seminars trainees take turns to present their clinical work to the seminar leader and other trainees in conditions of strict confidentiality. Clinical seminars should expose the trainees to different approaches in the British clinical tradition. Trainee presentations should include cases and observations from the trainee's current working life in addition to training cases supervised as part of the course.

There must be some teaching on the interface between psychiatry and psychodynamic work in order for practitioners to understand when to seek further advice about patients.

### **Clinical Work**

#### **Patient Assessment**

Training organisations must ensure that trainees are appropriately trained in psychodynamic counselling patient assessment and formulation.

#### **Training cases**

Trainees are required to treat two cases under weekly supervision. Each of the two cases, of different sexes, is to be treated at a frequency of not less than once weekly for a minimum of one year each. Trainees must have a substantial number of hours of supervised practice with experience of both long and short term work.



Patients must be assessed as suitable to be a training case. It is the responsibility of the training committee to ensure the ability of the assessor to make a psychoanalytic assessment. The final decision as to whether a case is suitable for a particular trainee is made by the training supervisor.

#### Clinical responsibility

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011 (currently being updated).

#### Supervision

Each training case must be supervised by an approved training supervisor on an individual or small group basis until qualification. If supervision occurs in a small group there must be no more than three trainees. Trainees must have at least one supervision per week.

The supervision should consist of a detailed discussion of the clinical material presented by the trainee about the treatment sessions. The trainee should bring comprehensive process notes detailing their observations, interactions and dialogue of the treatment session.

#### Personal psychoanalytic psychotherapy (Training therapy)

A trainee's personal psychoanalytic psychotherapy must be conducted by a training therapist (see below) for the entire length of his or her training.

Wherever possible the training therapy should be initiated at least six months before starting academic seminars. The training therapy must continue at least until qualification.

The frequency of the training therapy is preferably three times weekly and no less than once weekly.

#### Selection of Supervisors, Training Therapists and Clinical Seminar leaders.

Supervisors and training therapists should be selected by the training institution, and there must be written criteria and procedures in place and



available. The selection should be made by a training therapist committee or a subcommittee.

Only psychoanalysts, Jungian analysts and psychoanalytic psychotherapists registered with the BPC are eligible to be considered as supervisors and as training therapists, once they have the required amount of postgraduate clinical experience. This is detailed in the Selection of Training Analysts/Therapists and Training Supervisors document

Supervisors and clinical seminar leaders should have experience of counselling theory and practice and be psychoanalysts, Jungian analysts and psychoanalytic psychotherapists registered with the BPC.

### **Assessment of Trainees**

Trainees should be assessed throughout their training and given written feedback at least once per year.

The assessment should include feedback from all staff involved with the trainee, with the exception of the training therapist. The trainees' regular reports on their patients, and the assessment of their contribution to theoretical and clinical seminars, by teaching staff who are familiar with the trainee, should be discussed and critically evaluated by the members of the training committee. In addition, the external examiner provides a more distanced assessment of the clinical standard of the trainee, as shown in their clinical patient reports and assessments by supervisors and teaching staff.

The external examiner should be available to be consulted at any stage of the training.

### **Qualification and BPC registration**

In order to qualify, trainees must show sufficient competence in all areas outlined in the training institution's standards of proficiency.

The central qualifying process is the assessment of the trainee made by the trainers. Trainees may not graduate or be put on the register until they have met the training requirements.



BPC registration is offered following successful qualification from an accredited Member Institution (MI).

Accreditation of the MI involves a periodic thorough assessment of the training process and the MIs structure and postgraduate body. In addition, annual reports from the external examiner provide a regular assessment of the standard of the training.

The BPC wishes to ensure the psychoanalytic basis of all trainings, and therefore requires that the training therapists, supervisors and clinical seminar leaders are BPC registrants from the psychoanalytic or Jungian analytic section of the register.

To ensure the psychoanalytic basis of the training is maintained an appropriate balance of training committee members (psychodynamic and psychoanalytic psychotherapists) should be sought.

Training institutions have the discretion to vary training requirements in exceptional circumstances and as an interim measure. Any variations should be documented, indicating by whom agreed and brief details of the reasons, to be produced for the next reaccreditation.