

Accreditation Criteria

Training modality: Couple psychoanalytic psychotherapy

Patient group: Couple

These requirements are considered to be a **minimum** and it is the case that most trainings include additional training elements, for example, an Infant Observation, theory seminars, further training cases and assessed written work.

Selection of suitable candidates:

Applicants should

be evaluated in terms of integrity and psychological aptitude as suitable to work at depth with adults.

have completed a basic introductory training in psychoanalytic theory or an equivalent.

ideally have a background in allied professions, and have a degree, usually but not necessarily in medicine, nursing, psychology or social work 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. Any entry requirement course may not be included in the four years.

In the case of modified entrants there will be variation in terms of duration of training and variation of academic teaching and training requirements.

<u>Training components:</u>

academic teaching



clinical work

personal psychoanalytic psychotherapy

<u>Academic Teaching:</u>

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

The clinical seminar programme should last until qualification.

Psychoanalytic theory is to be taught by experienced and knowledgeable individual and couple psychoanalytic psychotherapists, psychoanalysts and Jungian analysts and encompass a thorough grounding in theory and couple psychoanalytic thought and practice. A range of psychoanalytic and couple psychoanalytic approaches, must be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and its clinical application to couple psychoanalytic work. A couple psychoanalytic emphasis should be sustained throughout the course.

Clinical seminar leaders should be psychoanalysts, Jungian Analysts, psychoanalytic psychotherapists and couple psychoanalytic psychotherapists registered with the BPC. Clinical presentations should expose the trainees to different clinical approaches in the field from the ones offered by their supervisors. In clinical seminars trainees take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality.

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

Clinical work

Psychiatric experience

This is a requirement if the trainee has not had sufficient experience of working



with mental illness and observing psychiatric conditions, as detailed in the *Psychiatric Experience* document [currently being updated].

Patient Assessment

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

<u>Infant observation</u>

It is recommended that training organisations require trainees to undertake an infant observation.

Training cases

Trainees are required to treat no less than six cases, under weekly supervision. The six cases, must be treated at a frequency of not less than once weekly, with two for a period of not less than 18 months and four for not less than 12 months. A training case cannot be seen at a greater frequency than the trainee's training therapy.

A psychoanalytic assessment of a potential training case is required and must be completed by a BPC registrant from the psychoanalytic or Jungian analytic or couple psychoanalytic psychotherapist part of the register; 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. Trainees must have weekly supervision until qualification.

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



Personal psychoanalytic psychotherapy (Training therapy)

A trainee's personal psychotherapy/psychoanalysis must be conducted by an approved training therapist [see below] for the entire length of their training.

Wherever possible the training therapy should be initiated at least one year before starting academic seminars. Training therapy must continue at least until qualification and be at least three times weekly. A training case cannot be seen at a greater frequency than the trainee's training therapy.

<u>Selection of Supervisors, Training Therapists</u>

Supervisors and training therapists should be selected by the training organisation, and there must be written criteria and procedures in place and available. The selection should be made by a training therapist committee.

Only BPC registered psychoanalysts, Jungian analysts and psychoanalytic psychotherapists can be considered as training therapists once they have the required postgraduate clinical experience. This is generally five years post qualification experience and a substantial number of clinical hours, as detailed in the BPC Guidelines for the selection of Training Analysts/Therapists and Training Supervisors.

Couple psychoanalytic psychotherapists are eligible to become training supervisors for the couple psychoanalytic training once they have acquired equivalent postgraduate experience. The applicant should have been in practice for at least five years since qualification and the applicant should have seen, post-qualification, a minimum of five couples for a minimum of 18 months. The Training Therapist Committee can use its discretion in varying those requirements in individual cases, for example when the Couple Psychoanalytic Psychotherapist has an existing Individual Psychoanalytic Psychotherapy qualification and has been supervising in that modality, or when the Couple Psychoanalytic Psychotherapist has extensive experience as a Tavistock Relationships Faculty Staff Member.



Assessment of Trainees

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

It is recommended that training organisations require trainees to write six monthly reports and a qualifying paper.

The assessment should include feedback from all staff involved with the trainee, except for the training therapist. In addition, the external examiner provides a more distanced assessment of the trainee's clinical standard, as shown in their clinical patient reports and assessments by supervisors and teaching staff.

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

Qualification and BPC registration

To be eligible 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 trainer's assessment of the trainees. Trainees can only graduate and be put on the BPC register once they have met the training requirements.

BPC registration is offered following a successful qualification from an accredited Member Institution [MI]

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