



Training criteria

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* 'Normally' in the context of this document means that this should be the presumption. In the exceptional circumstances of varying the requirements, trainings should keep a written record of the decision, and how and why it was arrived at.

Member Institution	Training organisation	Professional title	Code	Duration of training	Training cases	Personal therapy
AJA		Jungian Analyst	O1	min 4 yrs	4xweekly	4xweekly
AMPP		Medical Psychodynamic Psychotherapist	J12	4 years	1xweekly	1xweekly
APC	Gloucester Enfield Southampton Alton Tunbridge Wells Manor House Birkbeck CA	Psychodynamic Counsellor	J2	4 years	1xweekly	1xweekly
APPCIOS		Psychodynamic Counsellor	J5	4 years	Institutions	1xweekly
		Psychodynamic Psychotherapist	J15	min 4 yrs	Institutions	3xweekly
BPAS	Institute of Psychoanalysis	Psychoanalyst	O1	min 4 yrs	5xweekly	5xweekly
		Child Analyst	J9	min 4 yrs	5xweekly	4xweekly
BPF		Psychoanalytic Psychotherapist	O1 J8	min 4 yrs	3xweekly	3xweekly
		Psychoanalyst	O1	min 4 yrs	4-5xweekly	4-5xweekly
		Jungian Analyst	O1	min 4 yrs	4xweekly	4xweekly
		Psychodynamic Psychotherapist	J1	4 years	1-2xweekly	1-2xweekly
BSCPC	TCCR	Couples Psychoanalytic Psychotherapist	O2	min 4 yrs	1xweekly	3xweekly
FPC	WPF	Psychoanalytic Psychotherapist	O1	min 4 yrs	3xweekly	3xweekly
		Psychodynamic Psychotherapist	J1	4 years	1xweekly	1xweekly
FPS		Psychodynamic Psychotherapist	J16	4 years	1xweekly	1xweekly
NEAPP		Psychoanalytic Psychotherapist	O1 J8	min 4 yrs	3xweekly	3xweekly
		Psychodynamic Psychotherapist	J1	4 years	1xweekly	1xweekly
NIASP		Psychoanalytic Psychotherapist	O1	min 4 yrs	3xweekly	3xweekly
PCMH	West London and Belfast	Psychodynamic Counsellor	J13	min 3 yrs	1xweekly	1xweekly (recomm.)
SAP		Jungian Analyst	O1	min 4 yrs	4xweekly	4xweekly
		Psychodynamic Psychotherapist	J18			

SAPP		Psychoanalytic Psychotherapist	O1	min 4 yrs	3xweekly	3xweekly
SIP		Psychoanalytic Psychotherapist	O1	min 4 yrs	3xweekly	3xweekly
		Psychodynamic Psychotherapist	J1	4 years	1xweekly	1xweekly
TSP	Tavistock and Portman	Psychoanalytic Psychotherapist	O1	min 4 yrs	3xweekly	3xweekly
		Psychodynamic Psychotherapist	J1	4 years	2xweekly	2xweekly
			J10	4 years	1xweekly	1xweekly
			J11	4 years	1xweekly	1xweekly
		J16				
Group Psychodynamic Psychotherapist	J6	4 years	1xweekly	2xweekly		
Couples Psychodynamic Psychotherapist	J14	4 years	1xweekly	2xweekly		
Wessex		Psychodynamic Counsellor	J2	4 years	1xweekly	1xweekly
		Psychodynamic Psychotherapist	J1	4 years	2xweekly	2xweekly

* 'Normally' in the context of this document means that this should be the presumption. In the exceptional circumstances of varying the requirements, trainings should keep a written record of the decision, and how and why it was arrived at.

O1: Criteria for assessment and accreditation of psychoanalytic psychotherapy, psychoanalytic/Jungian analytic trainings (PAJ)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- should have completed a basic introductory training in psychodynamic work and psychoanalytic theory, or the equivalent, for a minimum of one year.
- normally should have a background in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- should have some experience in the field of psychiatry, as it is essential for practitioners to be able to recognise mental illness, and to know about the treatments available

2. Training course

Course duration: No training in psychoanalysis, Jungian analysis or psychoanalytic psychotherapy is expected to last for less than four years, maximum part-time.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 300 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

The core component of all psychoanalytic psychotherapy trainings must comprise the treatment of no less than two cases, under weekly individual supervision. Where appropriate, all trainings should encourage therapy with additional cases, sometimes at lesser frequencies.

Each of the two cases, normally one of each sex†, would normally be treated at a frequency of not less than three times weekly, one for a period of not less than two years, the other for not less than 18 months.

† *Please see guidance notes on Gender of Training Cases*

Training in diagnosis and assessment

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

A trainee's personal psychotherapy/ psychoanalysis must be conducted over the entire period of his or her training and at a frequency of not less than three times a week, and preferably at a greater frequency.

Normally* trainees must have personal psychoanalytic psychotherapy for at least one year before starting their academic seminars and continue for the duration of the training – i.e. until qualification.

Frequency must be the same frequency as the training cases are seen, as a minimum.

Selection of Training Therapists

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

Graduates of psychoanalytic, Jungian analytic and psychoanalytic psychotherapy trainings should be eligible to be considered for training therapists for the trainings they have done and other BPC broadly similar trainings, once they have the required amount of post graduate experience. This is generally five years post qualification, and a substantial number of clinical hours working at the intensity required by the training. Usually training therapists and supervisors would not carry out this function in trainings where the frequency required is greater than the frequency they have trained at.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a postgraduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as psychoanalytic psychotherapists / psychoanalysts / Jungian analysts.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by another BCP PAJ registrant who has at least 5 years post

qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to consider the individual concerned and appoint them according to their own equivalence criteria.

Heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC PAJ training will be eligible for inclusion in the BPC Register.

J1: Criteria for assessment and accreditation of psychodynamic psychotherapy trainings (PPT)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- should have completed a basic introductory training in psychodynamic work and psychoanalytic theory, or the equivalent, for a minimum of one year.
- generally, although not always, should have a background in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- must have some experience in the field of psychiatry, as it is essential for practitioners to be able to recognise mental illness, and to know about the treatments available.

2. Training course

Course duration: These trainings are usually four years' duration. There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 300 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

Each trainee should see a minimum of two training patients, for a minimum of one year each. The patients should be one of each sex, and treated minimum 1x weekly. Trainees should be

supervised weekly, for about one hour each time, normally by an experienced BPC psychoanalytic psychotherapist, on an individual or small group (max 3) basis, and have a different supervisor for each case - again, usually one of each sex. This supervision must continue until qualification or until the case has been concluded, whichever is the sooner.

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

Trainees must have personal psychoanalytic psychotherapy for at least six months before starting their academic seminars and continue for the duration of the training- i.e. until qualification. Frequency must be the same frequency as the training cases are seen, as a minimum, although 3x weekly is preferred.

Selection of Training Therapists.

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as psychodynamic psychotherapists.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC PPT training will be eligible for inclusion in the BPC Register in the Psychodynamic Psychotherapy category.

J18: Criteria for assessment and accreditation of Jungian psychotherapy trainings (JPT)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- should have completed a basic introductory training in Jungian psychotherapy, Jungian and psychoanalytic theory, or the equivalent, for a minimum of one year.
- generally, although not always, should have a background in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- must have some experience in the field of psychiatry, as it is essential for practitioners to be able to recognise mental illness, and to know about the treatments available.

2. Training course

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 200 hours. The course will usually be for 4 years part time.

Psychoanalytic and Jungian analytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and thought in the field, using the current, extensive, published literature. A wide range of psychoanalytic and Jungian analytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from the ones offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

Each trainee should see a minimum of two training patients, for a minimum of 18 months each. The patients should be one of each sex, and treated minimum 2x weekly. Trainees should be

supervised weekly, for about one hour each time, normally by an experienced BPC psychoanalytic/ Jungian psychotherapist, on an individual basis, and have a different supervisor for each case - again, usually one of each sex. This supervision must continue until qualification.

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally*, supervisors should be BPC registrants, with 5 years post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychotherapy [Training Therapy]

Trainees must have personal psychoanalytic psychotherapy/Jungian analysis for at least one year before starting their academic seminars and continue for the duration of the training- i.e. until qualification. Frequency must be the same frequency as the training cases are seen, as a minimum, although 3x weekly is preferred.

Selection of Training Therapists.

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

Normally *, training therapists should be BPC clinical practitioner registrants [psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category], with 5 years post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

*'Normally' in the context of this document means that this should be the presumption. In the exceptional circumstances of varying the requirements, trainings should keep a written record of the decision, and how and why it was arrived at.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as psychodynamic psychotherapists.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed & satisfactory CPD returns to BPC.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

This should be in exceptional circumstances because BPC want to show commitment to these trainings and to integrate fully them into the organisation as a whole. Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC JPT training will be eligible for inclusion in the BPC Register in the Jungian Psychotherapy category.

J2: Criteria for assessment and accreditation of Training in Psychodynamic Counselling (TPC)

1. Selection of suitable candidates

Applicants:

- should work in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- must be interviewed and thought suitable to undertake a course which involves the consideration of unconscious processes.
- must have completed a suitable pre clinical or clinical course of not less than one year

2. Training course

Course duration: The course will usually be for four years part time.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include theory seminars, workshops, personal development, and clinical presentations, with a minimum of 300 hours teaching.

Workshops should pay particular attention to the application of psychoanalytic thinking to different work situations and clinical encounters

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature.

Psychodynamic counselling theory and practice should be taught by experienced and knowledgeable practitioners, who have had training and experience in working as a counsellor.

Clinical presentations should include cases and issues from the trainees' current working life, as well as cases taken under supervision as part of the course.

ii. Supervision

Each trainee should have a minimum of 150 hours of supervised psychodynamic counselling practice. Within this, they should see at least one long term training case, for a minimum of one year, treated 1x weekly. Trainees should be supervised weekly, for about one hour each time, usually by an experienced BPC psychoanalytic psychotherapist, on an individual or small group (max 3) basis.

Trainees should be supervised weekly, for about one hour each time, usually by an experienced BPC psychoanalytic psychotherapist, with training and expertise in counselling, on an individual or small group (max 3) basis.

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults, and of counselling technique and practice.

iii. Personal Psychoanalytic Psychotherapy

It is trainees must have personal psychoanalytic psychotherapy whilst training at least once weekly, although more frequently is recommended.

Selection of Training Therapists

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 trainees.

Qualification

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

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC TPC training will be eligible for inclusion in the BPC Register in the Psychodynamic Counselling category.

J8: Criteria for assessment and accreditation of modified psychoanalytic psychotherapy trainings (Mod)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Normally, applicants should be graduates of either an ACP/BPC child psychotherapy training, or a BPC couples psychoanalytic psychotherapy training.

2. Training course

There should be three main components of the training, as follows –

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 90 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

Each trainee should see a minimum of two training patients, one for a minimum of two years, and one for a minimum of 18 months. The patients should be one of each sex, and treated minimum 3x weekly. Trainees should be supervised weekly by an experienced BPC psychoanalytic psychotherapist, on an individual basis, and have a different supervisor for each case - again, usually one of each sex. This supervision must continue until qualification or until the case has been concluded, whichever is the sooner.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

Trainees must have personal psychoanalytic psychotherapy at a minimum 3 x weekly frequency during their first psychoanalytic training.

Further personal therapy may be required by the training institution.

Selection of Training Therapists

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as psychoanalytic psychotherapists.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC Mod training will be eligible for inclusion in the BPC Register in the Psychoanalytic Psychotherapy category.

J12: Criteria for assessment and accreditation of medical psychodynamic psychotherapy trainings (MPPT)

Training course

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 200 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

ii. Supervision

Usually each trainee should see a minimum of two training patients, for a minimum of one year each. The patients should be one of each sex, and treated minimum 1x weekly. Trainees should be supervised weekly, for about one hour each time, normally by an experienced BPC psychoanalytic psychotherapist, on an individual or small group (max 3) basis, and have a different supervisor for each case - again, usually one of each sex. This supervision must continue until qualification or until the case has been concluded, whichever is the sooner.

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

Trainees must have personal psychoanalytic psychotherapy for at least six months before starting their academic seminars and continue for the duration of the training- i.e. until qualification. Frequency must be the same frequency as the training cases are seen, as a minimum, although 3x weekly is preferred.

Selection of Training Therapists

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

Assessment of Trainees

Trainees should be involved in workplace based assessment throughout their training, and given written feedback at least once per year. The assessment will include Royal College of Psychiatrists on line WPBAs (workplace based assessments) within the advanced psychiatric medical psychotherapy training portfolio.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

In order to qualify, trainees must show sufficient competence in all areas outlined in the RCPsych standards of proficiency.

Structures

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

All trainings must be approved by the committee of the Association of Medical Psychodynamic Psychotherapists, and graduates must present their CV to the committee.

Normally,* the committee should be composed of medical psychotherapists who are senior BPC Psychoanalytic/Jungian Analytic registrants and representatives of the BPC Registration Committee

Register

Graduates of an accredited BPC MPPT training will be eligible for inclusion in the BPC Register in the Medical Psychodynamic Psychotherapy category.

J13: Criteria for assessment and accreditation of psychodynamic counselling in mental health settings (PCMH)

Training course

Course duration: These trainings are usually four years' duration.

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 200 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

ii. Supervision

Each trainee should have a minimum of 150 hours of supervised psychosocial care practice. Trainees should be supervised weekly, for about one hour each time, normally* by an experienced BPC psychoanalytic psychotherapist, with training and expertise in psychosocial care, on a group basis.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

It is recommended that trainees should have personal psychoanalytic psychotherapy at a minimum of once weekly for at least six months before starting the seminars and continue for the duration of the training, i.e. until qualification.

Selection of Training Therapists

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

In order to qualify, trainees must show sufficient competence in all areas outlined in the course requirements

Structures

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Normally,* the committee should be comprised of medical psychotherapists who are senior BPC Psychoanalytic/Jungian Analytic registrants and representatives of the BPC Registration Committee.

Register

Graduates of an accredited BPC PCMH training will be eligible for inclusion in the BPC Register in the Psychodynamic Counselling category.

J16: Criteria for assessment and accreditation of Multidisciplinary Forensic Psychodynamic Psychotherapy (MFPP)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- generally, although not always, should have a background in allied professions, and usually have degrees in medicine, nursing, psychology, social work or probation.
- must have completed a suitable pre clinical or clinical course of not less than one year.

Training course

Course duration: The course should last for a minimum of four years.

There will be three main components of the training:

i. Academic Teaching

Each training must include at least 200 hours of academic teaching including seminars, workshops and clinical presentations, with particular emphasis on forensic psychotherapy and work in forensic settings.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches will be taught including those directly relevant to the forensic setting (individual and organisational), to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

ii. Supervision

Each trainee should see a minimum of two forensic patients, for a minimum of one year each. The patients should be one of each sex, and treated a minimum of 1x weekly.

Trainees should be supervised weekly, for one hour each time, normally* by an experienced British Psychoanalytic Council (BPC) registered psychoanalytic psychotherapist with experience working in forensic settings. Supervision can occur on an individual basis or in a small group (maximum of three trainees). Trainees will have a different supervisor for each case - again, usually one of each sex. This supervision must continue until qualification or until the case has been concluded, whichever is the sooner.

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision. Training cases should normally* first be assessed by a BPC accredited therapist. Final approval of the training case will be through the training committee, based on a report by the assessor. In addition the training committee must approve the setting and conditions in which the patient will be seen. The second training case will only be started after the first case has been seen for 6 months and only after a positive recommendation from the first case supervisor that the candidate is ready to start a second case.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Reference to: BPC clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

Supervisors will be selected by the training committee, which will have written criteria and procedures in place.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

Trainees must have personal psychoanalytic psychotherapy before starting their academic seminars and this must continue for the duration of the training- i.e. until qualification. The frequency of the individual personal therapy must be the same frequency as the training cases they intend to see (i.e. neither case can exceed the frequency of the candidate's personal therapy), although 3x weekly is recommended to allow greater flexibility in training and provide containment for more severely disturbed patients.

Training therapists should not participate in any way in the trainee's assessment.

Selection of Training Therapists

Training therapists should be selected by the training institution, and there should be written criteria and procedures in place. Normally* they should be experienced BPC registered

psychoanalysts, Jungian analysts or psychoanalytic psychotherapists of at least five years' post-qualification experience.

Assessment of Trainees

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

Each trainee should be allocated a progress advisor (normally*, a BPC registrant, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults in forensic settings). The trainees' regular reports on their patients, and their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the members of the training committee. This will involve discussion with staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as forensic psychodynamic psychotherapists.

Structures

The training will adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC MFPP training will be eligible for inclusion in the BPC Register in the Psychodynamic Psychotherapy category.

J9: Criteria for assessment and accreditation of Child Psychoanalytic trainings (CA)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with children.

Applicants:

- should hold a degree either in medicine, psychology, the social sciences or an equivalent degree or professional qualification.
- should have had previous clinical experience or have carried out other responsibilities for the development or welfare of individuals.

2. Training course

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 300 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Trainings should also include specialist teaching on child psychopathology and the social influences on childhood experience such as looked after and adopted children as well as issues of child protection.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

All courses should have two observation modules- infant and young child. These should be weekly observations, for a minimum of one year each. There should be seminars, usually

weekly, in infant and young child observation where trainees can also present their observations.

ii. Supervision

Each trainee should see a minimum of three training patients, young child, latency and adolescent, one for a minimum of two years, and two for a minimum of one year, and treated minimum 4x weekly. Trainees should be supervised weekly, by an experienced BPC psychoanalyst or BPC/ACP child psychotherapist on an individual basis, and have a different supervisor for each case, usually one of each sex. This supervision must continue until qualification or until the case has been concluded, whichever is the sooner.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalysis with children.

iii. Personal Psychoanalysis (Training Therapy)

Trainees must have personal psychoanalysis at a minimum 5 x weekly frequency during their training.

Selection of Training Analysts

Training analysts should be selected by the training institution, and there should be written criteria and procedures in place

Normally* training analysts should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience.

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 analyst. The trainees' regular reports on their patients, and their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as child psychoanalysts, and will appear in the 'Work with Children' section of the register.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training analyst and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned either by a BCP PAJ or ACP registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training analyst and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC CA training will be eligible for inclusion in the BPC Register in the Psychoanalytic category.

J10: Criteria for assessment and accreditation of psychodynamic psychotherapy trainings in time limited work with adolescents (PPA)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adolescents.

Applicants must have successfully completed a BPC registered psychoanalytic or psychodynamic psychotherapy course, or a course recognised by the training organisation as being a suitable foundation for the training.

2. Training course

Course duration: The course should last a minimum of four years.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

In addition there should be teaching on brief psychodynamic therapies, adolescent and young adult development and the developmental problems in adolescence, taught by experienced and knowledgeable practitioners.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

Each trainee should see a minimum of four training patients. Trainees should be supervised by an experienced BPC psychoanalytic psychotherapist, on an individual or small group basis, and have a different supervisor for each case.

Supervision should be at minimum of once every two weeks.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

Trainees must have personal psychoanalytic psychotherapy at a minimum 2x weekly frequency during the training.

Further personal therapy may be required by the training institution.

Selection of Training Therapists

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as psychodynamic psychotherapists.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned either by a BCP PAJ or ACP registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC PPA training will be eligible for inclusion in the BPC Register in the Psychodynamic Psychotherapy in time limited work with adolescents category.

J11: Criteria for assessment and accreditation of psychodynamic psychotherapy trainings in work with children and families (PPCT)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with children and families.

The training is aimed at those wishing to work therapeutically with children young people or families. Applicants should have a range of experience of working with this group before starting the training although not necessarily in a therapeutic context. The training is also suitable for those who already have a therapeutic qualification, such as with adults, but would like to be able to specialise in work with children young people or families.

2. Training course

Course duration: The course should last a minimum of four years.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations of not less than 300 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

In addition there should be teaching on attachment theory, normal child development and developmental problems in childhood, and psychoanalytic perspectives on family dynamics. These should be taught by experienced and knowledgeable practitioners.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Training Cases and Supervision

Trainees should see a minimum of four training cases, two of which should be a year's duration. Trainees should be supervised by an experienced BPC psychoanalytic psychotherapist, on an individual or small group basis, and have a different supervisor for each case.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases), nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

Supervision should be at minimum of once every two weeks.

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC registrants, with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

Trainees must have personal psychoanalytic psychotherapy at a minimum 1x weekly frequency during the training.

Further personal therapy may be required by the training institution.

Selection of Training Therapists

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

Training therapists normally* should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Having completed the training it is expected that graduates would be in a position to work with this children and families in a variety of contexts, such as in CAMHS, in school counselling, in private practice and in GP and hospital settings and local authority services. It should equip trainees to be able to offer psychotherapeutic work of a non-intensive kind, to make assessments and referrals on, and to be equipped to understand and take an important therapeutic role in multi-disciplinary and multi-agency contexts.

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as psychodynamic psychotherapists.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned either by a BCP PAJ or ACP registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC PPCF training will be eligible for inclusion in the BPC Register in the Psychodynamic Psychotherapy in work with children and families category.

O2: Criteria for assessment and accreditation of couples psychoanalytic psychotherapy (CPA)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- should have completed a basic introductory training in psychodynamic work and psychoanalytic theory, or the equivalent, for a minimum of one year.
- generally, although not always, should have a background in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- must have some experience in the field of psychiatry, as it is essential for practitioners to be able to recognise mental illness, and to know about the treatments available.

2. Training course

Course duration: No training in couples psychoanalytic psychotherapy is expected to last for less than four years, maximum part-time.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 300 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

The core component of all couples psychoanalytic psychotherapy trainings must comprise the treatment of no less than six couples, under supervision.

Training in diagnosis and assessment

Either an organisation has evidence that a candidate is appropriately trained in this respect prior to his or her selection for training, or, the organisation must provide that component of training and make its satisfactory completion compulsory for qualification.

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases, nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Graduates of psychoanalytic, Jungian analytic and psychoanalytic psychotherapy trainings should be eligible to be considered for supervisors for the trainings they have done and other BPC broadly similar trainings, once they have the required amount of post graduate experience. This is generally five years post qualification, and a substantial number of clinical hours working at the intensity required by the training. Usually training therapists and supervisors would not carry out this function in trainings where the frequency required is greater than the frequency they have trained at.

iii. Personal Psychoanalytic Psychotherapy (Training Therapy)

A trainee's personal psychotherapy/ psychoanalysis must be conducted over the entire period of his or her training and at a frequency of not less than three times a week, and preferably at a greater frequency.

Normally* trainees must have personal psychoanalytic psychotherapy for at least one year before starting their academic seminars and continue for the duration of the training, i.e. until qualification.

Frequency must be the same frequency as the training cases are seen, as a minimum.

Selection of Training Therapists

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

Graduates of psycho-analytic, Jungian analytic and psychoanalytic psychotherapy trainings should be eligible to be considered for training therapists for the trainings they have done and other BPC broadly similar trainings, once they have the required amount of post graduate experience. This is generally five years' post qualification, and a substantial number of clinical hours working at the intensity required by the training. Usually training therapists and supervisors would not carry out this function in trainings where the frequency required is greater than the frequency they have trained at.

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 their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates.

Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification

experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC CPA training will be eligible for inclusion in the BPC Register in the couples psychoanalytic psychotherapy category.

J14: Criteria for assessment and accreditation of psychodynamic psychotherapy with couples trainings (CPP)

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- generally, although not always, should have a background in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- must have some experience in the field of psychiatry, as it is essential for practitioners to be able to recognise mental illness, and to know about the treatments available.
- must have completed a suitable pre clinical or clinical course of not less than one year, and had personal psychoanalytic psychotherapy for a least one year before beginning the course.

2. Training Course

Course duration: The course should last for a minimum of four years. Some trainees may take longer to complete the requirements.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 200 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision of Training Cases

Each trainee should see two couples for once weekly conjoined psychotherapy for a minimum of one year each.

Supervision should be weekly in a small group (maximum 3), which continues until qualification.

Each case should have a different supervisor.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases and nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

Selection of Supervisors

Supervisors of group psychotherapy and of institutional observation and consultancy should normally* be BPC registrants (psychoanalytic part of register) of at least five years' duration, and who have training in couples psychotherapy.

3. Personal Therapy

Trainees must have twice-weekly individual psychoanalytic psychotherapy with a Training Therapist, throughout their training, which must continue until qualification.

Selection of Training Therapists

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

Normally* they should be experienced BPC registered psychoanalysts, Jungian analysts or psychoanalytic psychotherapists of at least five years' post-qualification experience.

Assessment

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 groups, and their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee.

3. Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as couples psychodynamic psychotherapists.

4. Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's centralised complaints system, and agree to pass all complaints, or possible ethical issues, to the relevant BPC committee.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

This should be in exceptional circumstances because BPC wish to show commitment to these trainings and to integrate fully them into the organisation as a whole. Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC CPP training will be eligible for inclusion in the BPC Register in the couples psychodynamic psychotherapy category.

J4: Criteria for assessment and accreditation of Group Analytic Training

1. Selection of suitable candidates

Applicants:

- should have a first degree or equivalent and must have completed an approved Introductory Course in Group Analysis or equivalent prior to admission.
- must have been either in twice weekly group analysis with a Training Group Analyst, or in twice weekly individual psychoanalytic psychotherapy with a Training Therapist, for at least one year prior to the start of the training.
- for block courses, must have been in therapy groups conducted by a training group analyst, or personal therapy with a Training Therapist, for the equivalent amount of time before admission to the Qualifying Courses.

Personal suitability for the course is assessed through the admissions procedure, which includes a psychiatric assessment and a panel interview where proof of academic and clinical experience will be required.

2. Training course

Course duration: The training course should last for a minimum of four years.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include taught seminars of not less than 200 hours and include the theoretical model of group analysis which draws from psychoanalysis, sociology, developmental and social psychology. Psychoanalytic theory is central to the development of group analytic theory and this should be reflected in the course. The training should enable trainees to develop a group analytic understanding of the individual, which includes the socio-cultural factors involved in pathogenesis, healing and the therapeutic encounter.

Theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and group psychoanalytic thought, using the current, extensive, published literature.

Clinical seminars should run alongside the theoretical seminars throughout the Qualifying Courses.

Trainees should present papers in seminars which demonstrate their understanding of theory and its relevance to clinical work. A group analytic emphasis should be sustained throughout

the course. The course should involve critically examining the basis of any theoretical or developmental model being explored in terms of the historical, political and social context.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

Trainees should conduct two groups under supervision. The first, a once weekly heterogeneous clinical group for adults, should continue for a minimum of two years. The second should be a brief group covering 30 sessions. The trainee should have a different supervisor for each group and supervision should be in small groups [maximum 4].

The total number of hours spent in supervision during the course of four years should not be less than 200 hours.

Supervisors should supply written reports on the trainees Course Committee at least once per year.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases (groups are deemed to be training cases for the purposes of this protocol), nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

Selection of Supervisors

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

Normally, the supervisor should have had a minimum of five years' post qualification experience in conducting group analytic psychotherapy patient groups, gained in NHS outpatient departments and/or private practice. If gained in the NHS, this should include at least one slow-open heterogeneous patient group. The experience gained should be in clinical rather than educational or managerial settings.

Experience in non-clinical groups would be valued as additional experience suitable for supervising student's second training groups.

They should also have experience in one of the following for at least one year:

- Supervising a group of people working with individuals
- Supervising an individual running groups
- Supervising a group of people running groups (not necessarily group analytic groups)

Normally,* supervisors should be BPC clinical practitioner registrants (group analytic category).

iii. Personal Psychotherapy

Trainees must either undertake twice-weekly personal group analysis with a Training Group Analyst, or twice weekly individual psychoanalytic psychotherapy with a Training Therapist, throughout their training, which must continue until qualification.

For trainees who have individual personal therapy, they must also participate in a weekly group conducted by a Training Group Analyst throughout the training.

Selection of Training Therapists

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

Training Group Analysts

Normally* they should have least five years' post-graduate teaching and supervision experience in the field of group analysis, with considerable experience of conducting a once weekly or twice weekly group-analytic group over a long term, and can show from presentation and clinical material that her/his work is moving towards the establishment of a twice weekly group which will be well balanced and suitable for trainees.

They should have a wide experience of conducting different types of groups within the group analytic tradition as well as in other contexts.

Individual Training Therapists

Normally,* training therapists should be BPC clinical practitioner registrants (either group analytic or psychoanalytic category), of at least five years' post-qualification experience.

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 groups, and their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the trainee well but can provide a more distanced assessment of the clinical standard of the trainee as shown in their clinical reports and their clinical discussions in seminars.

3. Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as group analysts.

4. Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP GA or PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

This should be in exceptional circumstances because BPC wish to show commitment to these trainings and to integrate fully them into the organisation as a whole. Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC GA training will be eligible for inclusion in the BPC Register in the Group Analytic category.

J6: Criteria for assessment and accreditation of Psychodynamic Group Psychotherapy Training

1. Selection of suitable candidates

Training institutions should evaluate the applicants in terms of integrity and psychological health as suitable to work at depth with adults.

Applicants:

- generally, although not always, should have a background in allied professions, and usually have degrees in medicine, nursing, psychology or social work.
- must have some experience in the field of psychiatry, as it is essential for practitioners to be able to recognise mental illness, and to know about the treatments available.
- must have completed a suitable pre clinical or clinical course of not less than one year.

2. Training Course

Course duration: The course should last for a minimum of four years.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations, of not less than 300 hours.

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature. A wide range of psychoanalytic approaches must also be taught, to enable trainees to develop a flexible but thorough understanding of the theory base, and to encourage critical appraisal of theory.

Clinical presentations should expose the trainees to different clinical approaches in the field from those offered by their supervisors and training therapists. In clinical seminars trainees should take turns to present their clinical work to the seminar leader and other trainees, in conditions of strict confidentiality of any identifying features.

If a trainee does not have sufficient experience of working with mental illness, and observing psychiatric conditions, the training institution must require that the applicant undertake a psychiatric placement. All courses must have some teaching on psychiatry.

ii. Supervision

Each trainee should run a psychotherapy group for two years, and a short term group. Supervision should be weekly in a small group (maximum 4), which continues until qualification.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases (groups are deemed to be training cases for the purposes of this protocol), nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

Selection of Supervisors

Supervisors of group psychotherapy and of institutional observation and consultancy should normally* be BPC registrants (psychoanalytic part of register) of at least five years' duration, and who have training in group psychotherapy.

They should have a proven record of conducting psychotherapy groups within the NHS since qualification.

3. Personal Therapy

Trainees must either undertake a once or twice-weekly personal group therapy with a Training Group therapist, or twice weekly individual psychoanalytic psychotherapy with a Training Therapist, throughout their training, which must continue until qualification.

Selection of Training Therapists

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

Training Group Therapists

Normally* they should have least five years' post-graduate teaching and supervision experience in the field of group therapy.

Individual Training Therapists

Normally* they should be experienced BPC registered psychoanalysts, Jungian analysts or psychoanalytic psychotherapists of at least five years' post-qualification experience.

Assessment

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 groups, and their contribution to theoretical and clinical seminars, should be discussed and critically evaluated by the staff who know the trainee well, and by experienced colleagues who do not know the

trainee well but can provide a more distanced assessment of the clinical standard of the trainee.

4. Qualification

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

Trainings must have a post-graduate organisation to which those qualifying may become members. This organisation must maintain a register of these graduates, who will be eligible to be registered with the British Psychoanalytic Council as group psychotherapists.

5. Structures

Training institutions must have a training committee for each course they have. In addition, they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities. These may be shared with other trainings.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned by a BCP GA or PAJ registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

This should be in exceptional circumstances because BPC wish to show commitment to these trainings and to integrate fully them into the organisation as a whole. Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Register

Graduates of an accredited BPC GP training will be eligible for inclusion in the BPC Register in the Group Psychotherapist category.

J5: Criteria for assessment and accreditation of Psychodynamic counsellor in organisational settings training (PCOS)

1. Selection of suitable candidates

Applicants should be able to demonstrate an ability to work to a high academic standard.

Personal suitability for the training should be assessed through the admissions procedure, and applicants must be thought suitable to undertake a course which involves the consideration of unconscious processes.

2. Training course

Course duration: The course will usually be for four years part time.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include theory seminars, workshops, personal development, and clinical presentations, with a minimum of 30 hours teaching.

Workshops should pay particular attention to the application of psychoanalytic thinking to different work situations and clinical encounters

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature.

The theory and practice of psychodynamic counselling within institutional settings should be taught by experienced and knowledgeable practitioners, who have had training and experience in working in the field.

Clinical presentations should include work and issues from the trainees' current working life, as well as work taken under supervision as part of the course.

ii. Supervision

Each trainee should have a minimum of 150 hours of supervised psychosocial care practice. Trainees should be supervised weekly, for about one hour each time, usually by an experienced BPC psychoanalytic psychotherapist, with training and expertise in psychosocial care, on a group basis.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases (groups are deemed to be training cases for the purposes of this protocol), nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

iii. Personal Psychoanalytic Work

Trainees must participate in weekly groups looking at both personal and professional issues with a training therapist/supervisor throughout their training.

It is usually recommended that trainees also have personal psychoanalytic psychotherapy whilst training.

Selection of Training Therapists and Supervisors

Training therapists should be selected by the relevant part of the training institution or post graduate organisation, and there should be written criteria and procedures in place.

Normally,* training therapists and supervisors should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 trainees.

Qualification

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

Structures

Trainings must have either

- a training committee for each course they have, in which case they need to have the following sub-committees: training therapist and supervisor, continuing professional development, professional standards, ethics, and professional activities, which may be shared with other trainings.

Or

- Where a training is contained between two or more organisations, the supervision and personal therapy part of the training should be directed and managed by either a separate committee or a subcommittee of the post graduate organisation.

Normally* heads of the supervision and personal therapy part of the training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned either by a BCP PAJ, or ACP registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Register

Graduates of an accredited BPC PCOS training will be eligible for inclusion in the BPC Register in the Psychodynamic Counselling category.

J15: Criteria for assessment and accreditation of psychodynamic therapist in organisational settings trainings (PTOS)

1. Selection of suitable candidates

Applicants should be able to demonstrate an ability to work to a high academic standard.

Personal suitability for the training should be assessed through the admissions procedure, and applicants must be thought suitable to undertake a course which involves the consideration of unconscious processes.

Trainees should normally have completed an accredited course in psychodynamic counselling, or have reached the equivalent standard of training and expertise.

2. Training course

Course duration: The course will usually be for two years part time.

There should be three main components of the training, as follows:

i. Academic Teaching

This should include theory seminars, workshops, personal development, and clinical presentations, with a minimum of 300 hours teaching.

Workshops should pay particular attention to the application of psychoanalytic thinking to different work situations and clinical encounters

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature.

The theory and practice of psychodynamic counselling within institutional settings should be taught by experienced and knowledgeable practitioners, who have had training and experience in working in the field.

Clinical presentations should include work and issues from the trainees' current working life, as well as work taken under supervision as part of the course.

ii. Supervision

Each trainee should have a minimum of 150 hours of supervised psychosocial care practice. Trainees should be supervised weekly, for about one hour each time, usually by an experienced

BPC psychoanalytic psychotherapist, with training and expertise in psychosocial care, on a group basis.

Training Institutions must adhere to the BPC's protocol for clinical responsibility for training cases (groups are deemed to be training cases for the purposes of this protocol), nominate a specific person in each case and complete contracts for each case.

Please see clinical responsibility protocol and clinical responsibility proforma documents of 2011

iii. Personal Psychoanalytic Work

Trainees must participate in weekly groups looking at both personal and professional issues with a training therapist/supervisor throughout their training.

It is usually recommended that trainees also have personal psychoanalytic psychotherapy whilst training.

Selection of Training Therapists and Supervisors

Training therapists should be selected by the relevant part of the training institution or post graduate organisation, and there should be written criteria and procedures in place.

Normally,* training therapists and supervisors should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

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 trainees.

Qualification

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

Structures

Trainings must have either

- a training committee for each course they have, in which case they need to have the following sub-committees: training therapist and supervisor, continuing professional

development, professional standards, ethics, and professional activities, which may be shared with other trainings.

Or

- Where a training is contained between two or more organisations, the supervision and personal therapy part of the training should be directed and managed by either a separate committee or a subcommittee of the post graduate organisation.

Normally* heads of the supervision and personal therapy part of the training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

All trainings must adhere to BPC CPD requirements, and make explicit that continued registration is dependent on completed and satisfactory CPD returns to BPC. The CPD return should be countersigned either by a BCP PAJ or ACP registrant who has at least 5 years post qualification experience. In the event of this not being possible, registrants must contact the Professional Standards Committee to discuss alternative arrangements.

All trainings and graduate bodies must adhere to BPC's complaints procedure and ethical code.

In the appointment of training therapists and supervisors, if the relevant committee consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Register

Graduates of an accredited BPC PTOS training will be eligible for inclusion in the BPC Register in the Psychodynamic Psychotherapy in Organisational Settings category.

J3: Criteria for assessment and accreditation of Application of Psychodynamic Principles Trainings (APPT)

See below:

- (J7) DIT
- (J17) MBT

1. Selection of suitable candidates

Applicants would usually work in allied professions and have qualifications in social work, nursing, medicine or clinical psychology. However, applicants with other backgrounds will be considered.

Applicants must be interviewed and thought suitable to undertake a course involving the application of psychoanalytically informed thinking to work situations.

2. Training course

There should be three main components of the training, as follows:

i. Academic Teaching

This should include seminars, workshops and clinical presentations.

Workshops should pay particular attention to the application of psychoanalytic thinking to different work situations and clinical encounters

Psychoanalytic theory should be taught by experienced and knowledgeable practitioners, and encompass a thorough grounding in theory and psychoanalytic thought, using the current, extensive, published literature.

Presentations by trainees should include a variety of work situations and this will include clinical cases from the trainees' current employment situation, as well as cases taken under supervision as part of the course.

ii. Supervision

Cases must be accepted as suitable cases for treatment by a trainee under careful supervision.

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 notes detailing the interactions and dialogue of the treatment session; the supervisor should be informed of all the details about the patient in order to safeguard the treatment and the patient's best interests.

Selection of Supervisors

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

Normally,* supervisors should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

iii. Personal Psychoanalytic Psychotherapy

It is recommended that trainees have personal psychoanalytic psychotherapy whilst training

Selection of Training Therapists

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

Normally,* training therapists should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience of both intensive and non-intensive psychoanalytic psychotherapy with adults.

Assessment of Trainees

Trainees should be assessed throughout their training.

The assessment should include feedback from all staff involved with the trainees.

Qualification

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

Structures

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider, in exceptional circumstances, that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Graduates will not be registered individually by BPC, the accredited APPT courses will be listed on the BPC website and relevant printed materials. Graduates may therefore describe themselves as having graduated from a BPC accredited training in the Application of Psychoanalytic Principles.

(J7) Dynamic interpersonal Therapy Training: DIT

1. Selection of suitable candidates

The training is open to individuals who possess a Diploma level or equivalent qualification in psychodynamic/analytic counselling or psychotherapy.

Evidence of certification would need to be produced before acceptance onto the training. Applicants must also be able to demonstrate that they have at least two years post qualification experience in a public mental health setting or in the voluntary sector working with patients with mental health problems. This experience will need to be evidenced through a reference prior to being accepted onto the training.

Because this is an advanced training that assumes prior competence in dynamic/analytic work, the training will only accept applicants who are able to demonstrate core professional skills. These include general therapeutic competences such as an ability to form therapeutic relationships with clients, effective listening and communication skills, and the basic and specific analytic/dynamic competences as mapped out below. Applicants will be invited to complete the DIT Self-Assessment Tool prior to coming on the course.

2. Training course

The training course should follow the DIT manual and appendices for training.

There should be two main components of the training, as follows:

i. Academic Teaching

The initial training should take place over a minimum of four days, and should include opportunities to practice formulating within the DIT model and for role-playing using the participants' own clinical examples.

At the end of the four day training competence will be assessed through a clinical assessment of competence skills during an observed role play using actors. The role-plays will be videotaped and rated by one of the trainers using the approved rating scale.

The method should be taught by experienced and knowledgeable psychoanalytic practitioners with extensive experience and training in the DIT model.

ii. Supervision

Following the four-day training participants are expected to undertake two supervised cases for 16 sessions each. Each session will be taped. Both cases must be satisfactorily completed in order to become a DIT practitioner.

Supervision may be provided in small groups of three or four students or individually. The groups should remain 'closed' for the duration of the two cases.

Selection of Supervisors

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

Normally,* supervisors should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience and with extensive experience of the DIT model.

'Normally'* in the context of this document means that this should be the presumption. In the exceptional circumstances of varying the requirements, trainings should keep a written record of the decision, and how and why it was arrived at.

Assessment of Trainees

During the training, competence should be assessed through:

- Regular attendance at, and participation in, the supervision for two cases.
- Three audiotapes of clinical sessions with each patient from each of the three phases will be submitted for formal examination of adherence to the model. One tape from each case should be rated by an independent assessor (i.e. not the supervisor).
- If one of the cases is not 'passed', the participant will be required to take on an additional case and submit further tapes. After two failed attempts, the supervisor should consider with the therapist whether continuation with this particular model is indicated and, if so, help the therapist to identify what additional measures may need to be put in place in order to help them to develop to the required level.

Structures

Training institutions or organisations must have a training committee for each course they have.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider that there is a suitable applicant who does not meet the stated criteria,

they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Graduates will not be registered individually by BPC: the accredited DIT courses will be listed on the BPC website and relevant printed materials. Graduates may therefore describe themselves as having graduated from a BPC accredited training in Dynamic Interpersonal Therapy.

Equivalence Criteria for DIT Applicants

i. Academic Teaching

Applicants should have attended teaching which provides knowledge of developmental theory, knowledge of an analytic model of the mind, and knowledge of the rationale for an analytic approach, and should be able to evidence this knowledge in particular areas of psychoanalytic theory as specified in the psychodynamic competences framework.

Psychoanalytic theory should have been taught by experienced and knowledgeable practitioners, and psychodynamic theory and practice should have been taught by experienced and knowledgeable practitioners.

Applicants must provide written confirmation of their successful completion of these core modules in psychoanalytic theory, and information about the curriculum.

ii. Supervision

Applicants should have a minimum of 150 hours of supervised psychodynamic work.

Applicants must provide written details of their psychodynamic work, and provide a supervisors reference.

iii. Personal Therapy

Applicants should have experience of personal psychoanalytic/psychodynamic therapy of at least one year once weekly.

Applicants should provide written details of their psychotherapy experience.

(J17) Mentalization Based Treatment training: MBT

Mentalization Based Treatment is an evidence based psychological therapy for borderline personality disorder (BPD) now being developed for other disorders and applied in a number of different groups, for example with families and adolescents. The training is organised in a stepped system from basic training to practitioner level and then through to supervisor to training levels.

1. Selection of suitable candidates

Applicants should be qualified health professionals such as Mental Health Nurses, Occupational Therapists, Clinical/Counselling Psychologists, Psychiatrists and Social Workers, Psychotherapists.

They should have undertaken a course of study, for example the KUF for personality disorder, and have a good working knowledge of psychoanalytic and other theories underpinning the development of personality.

They should have a minimum of one year's experience working therapeutically with people with personality disorder in teams or in individual or group work.

They should have undertaken supervised practice and be committed to professional standards and practice within an ethical framework.

2. Training course

The training course should follow the MBT manual and appendices for training.

There should be two main components of the training, as follows:

i. Academic Teaching

The introductory training should take place over a minimum of three days, and should include opportunities to practice formulating within the MBT model and for role-playing using the participants' own clinical examples.

At the end of the training, competence will be assessed through a clinical assessment of competence skills.

The method should normally be taught by experienced and knowledgeable psychoanalytic practitioners with extensive experience and training in the MBT model.

ii. Supervision

Following the three-day training, participants are expected to undertake a minimum of four cases or two groups, have ongoing experience of at least two cases per year and have weekly supervision.

Supervision may be provided in small groups of three or four students or individually.

Selection of Supervisors

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

Normally,† supervisors should be BPC clinical practitioner registrants (psychoanalytic psychotherapy/ psychoanalysis/Jungian analysis category), with five years' post qualification experience and with extensive experience of the MBT model.

Assessment of Trainees

Structures

Training institutions or organisations must have a training committee for each course they have.

In the appointment of training therapists and supervisors, if the relevant committee of the training course consider that there is a suitable applicant who does not meet the stated criteria, they have discretion to look at the individual concerned and appoint them according to their own equivalence criteria.

Normally heads of training, and senior staff members, should be BPC registrants and eligible to be training therapists and supervisors.

Graduates will not be registered individually by BPC: the accredited MBT courses will be listed on the BPC website and relevant printed materials. Graduates may therefore describe themselves as having graduated from a BPC accredited training in Mentalization Based Therapy.

†'Normally' in the context of this document means that this should be the required level of practitioner, and equivalence would need to be assessed by the MBT training committee.