

Full Accreditation As a Cognitive Behavioural Psychotherapist Criteria and Guidelines

Full Accreditation is dependent on submission, 12 months after the date of Provisional Accreditation, of an application for Full Accreditation (see separate criteria and guidelines). Full Accreditation is for 12 months, after this, members are recredited annually by making a yearly online declaration of fulfilling the required standards for CBT practice, CBT supervision and CBT CPD. This is verified by random audit.

The overall process of Accreditation is not complete until Full Accreditation has been granted. If an application for Full Accreditation is not received, or granted, then the practitioner's status of Provisional Accreditation will lapse and the individual will have removed themselves from the CBT Register UK.

CRITERIA FOR FULL ACCREDITATION

The following seven criteria must be met in order to gain Full Accreditation:

1. Have been awarded Provisional Accreditation
2. Be practicing and accountable as a Behavioural and/or Cognitive Psychotherapist
3. Demonstrate ongoing Continuing Professional Development
4. Have ongoing CBT Clinical Supervision
5. Sign a statement of intent to sustained commitment to the theory and practice of Behavioural and/or Cognitive Psychotherapy which includes Continuing Professional Development, and ongoing Clinical Supervision
6. Demonstrate knowledge and understanding of the therapeutic relationship and competence in the development, maintenance and ending of such relationships
7. Adhere to the BABCP Standards of Conduct, Performance and Ethics in the Practice of Behavioural and Cognitive Psychotherapies, and be willing to be scrutinised in this adherence as required

GENERAL NOTES ON MAKING AN APPLICATION FOR FULL ACCREDITATION

All applications must be presented on the most up to date forms relating to Full Accreditation. Please check the Accreditation section of the BABCP website, to ensure you have the most up to date forms, information, criteria and guidelines.

Forms and documents required for information purposes or completion are:

- **Criteria and Guidelines for Full Accreditation** (for information purposes)
- **Application for Full Accreditation** (for completion and submission) – you must complete ALL relevant sections of the form, and it should be signed within one month prior to receipt at the BABCP office
- **Supervisor's Report** (for completion and submission) – this must be completed by your current CBT Clinical Supervisor. This document should be completed and signed within one month prior to your application submission. Also see Supervisor's Report SAMPLE
- **Guidelines and Examples for Completion of CBT CPD Reflective Statements and CBT Supervision Log Books** (for information purposes)
- **Reflective Statements of Continuing Professional Development** (for completion and submission) – you must provide 5 reflective statements for the 12 months since you were awarded Provisional Accreditation
- **Log Book of CBT Clinical Supervision** (for completion and submission) – you must provide your logbook for the 12 months since you were awarded Provisional Accreditation

MAKING YOUR APPLICATION

- Check with the Accreditation section of the website, for current fees
- All forms should be typed, not hand-written (contact the BABCP office if this is not possible)
- Do not provide original certificates, please only send photocopies
- Attach additional sheets if needed
- Ask your Supervisor to complete the Supervisor's Report

Each section of the Full Accreditation Application Form is explained, and example information for each section is shown below.

APPLICANT'S DETAILS

Please complete this section as fully as possible

Contact information provided will be used for all BABCP correspondence – the BABCP database will be updated with this information.

You will be asked to provide further / different contact information for entry on the CBT Register UK, if applicable.

Applicant's Name CLAIRE DWYER

- All forms to be typed, not hand-written (contact the BABCP office if this is not possible)
- Attach additional sheets if needed
- Ask your Supervisor to complete the Supervisor's Report
- Refer to the Criteria and Guidelines for Full Accreditation when completing the application form
- Also refer to the Guidelines and Examples for Completion of CBT Supervision Logs and CPD Reflective Statements

APPLICANT'S DETAILS

Full Name	Claire Dwyer		
Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input checked="" type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other (state)
Profession	Mental Health Nurse		
Job Title	Cognitive Behavioural Psychotherapist		
Address <small>This is the address used for BABCP correspondence. You will have a choice of a different address for the register if Accredited</small>	44 Any Address, Any Town, Anywhere		Post Code ANY ONE
Tel Work	020 7946 5432		
Tel Home / Mobile	07700 905544		
E-mail	claire.dwyer@anyemail.com		

Enclosures

Please tick enclosure checklist below when you have included all enclosures.

CPD Reflective Statements	<input checked="" type="checkbox"/>	<p>Return all documentation to:</p> <p>BABCP Imperial House Hornby Street Bury BL9 5BN</p> <p>T: 0161 705 4304 E: babcp@babcp.com</p>
Certificates / Evidence of CPD Activities	<input checked="" type="checkbox"/>	
Clinical Supervision Log Book	<input checked="" type="checkbox"/>	
Supervisor's Report	<input checked="" type="checkbox"/>	
Additional Information (where necessary)	<input type="checkbox"/>	

An Application for Full Accreditation can only be made by those who have already been awarded Provisional Accreditation (Criterion One).

Your application for Full Accreditation should be made 12 months after the date Provisional Accreditation was awarded; please include the date of Provisional Accreditation.

Also provide details of membership of other professional bodies, including those relating to your Core Profession.

CRITERION ONE: Provisional Accreditation

Please confirm that you have been awarded Provisional Accreditation, and the date of the award.

Confirmation

Date of Award

I have been awarded Provisional Accreditation

YES

5 September 2007

Membership of Professional Body

If you are a member of a professional body, you are required to give your professional membership number or PIN (e.g. NMC, GMC), and the name of the body with whom this can be checked; date of birth required to check.

PIN

Body

Date of Birth

00Y1823E

NMC

23-05-68

If membership of your professional body has lapsed, please provide a covering note stating the reason, and check this box

If you were a KSA applicant for Provisional Accreditation then please check this box

If you do not or never had membership with a professional body and you were not a KSA applicant then please provide a covering note stating the reason, and check this box

CRITERION TWO: Professional Accountability and CBT Practice

This section is about your Professional Accountability within your current job role/s (Criterion Two).

Please evidence your commitment to the practice of Cognitive Behavioural Psychotherapy. In order to be eligible for Accreditation with the BABCP, you must be currently practicing CBT in the UK, and more than 50% of your clinical practice must be CBT.

The minimum caseload for maintaining Accreditation is two clinical contacts or equivalent per week - and this can be interpreted in a variety of ways:

Example One: Part-time (0.4wte) CBT therapist who provides CBT clinical supervision and training in a specialised trauma service. Clinical work consists of seeing one patient a week for a two hour session.

Example Two: Part-time university lecturer in CBT who works in primary care one afternoon a week, seeing four patients with mild-moderate Axis I problems. Sessions are only 30 minutes long.

Example Three: Full-time NHS manager in CBT service, who has no opportunity for clinical work in this role. Has a CBT private practice on Saturday mornings seeing two patients for one hour each.

Give details of the last year of all of your practice, employment and working roles/s (which may include time undergoing training); this will provide Accreditors with an overall sense of the context within which you are practicing CBT.

For your **Current Professional Practice**, give details of **the last year** of your practice, including client population and setting.

Dates	Professional Position	Employed By (or Private Practice)	Professionally Accountable To	Clinical Setting	Client Population	Hours per Week	Total % Involving CBT
June 11 - date	Cognitive Behavioural Psychotherapist	An NHS Trust Somewhere	Clinical Lead	Adult Mental Health Service – Secondary Care – in and out patient	Severe & enduring mental health problems	22.5	80
Oct 12 - date	Cognitive Behavioural Psychotherapist	Private Practice	Local GP Practice, and 'CBT-Trauma'	Private Practice	Depression, anxiety disorders & PTSD	8	100

CRITERIA & GUIDELINES FOR FULL ACCREDITATION

For your **Behavioural and/or Cognitive Practice only**, give details of the proportions of your practice spent on Clinical Practice, Supervision, Teaching & Training, Consultation, and other activities, and give a summary of your current CBT practice.

Clinical Practice	% = 60
Receiving Supervision	% = 5
Supervision of Others	% = 10
Receiving Training	% = 5
Teaching / Training Others	% = 10
Consultancy	% =
Other (state)	% = 10 Other nursing responsibilities on rota
Summary of, and Additional Comments on Current CBT Practice	<p>For the NHS I provide individual and group Cognitive Behavioural Therapy for both in patients and the out patient population who come to secondary care services. Most of my clients are complex cases, including diagnoses of personality disorders and psychosis. The multidisciplinary team consists of three consultant psychiatrists, two nurse specialist CBT's, and two psychologists. We meet weekly for case discussions and referrals, and the CBPs meet monthly to discuss formulations and CBT development within the service.</p> <p>My NHS role involves increasing time supervising and training others, including supervising IAPT trainees. I will be providing training on the local IAPT course from next month.</p> <p>My private practice has only been developed recently. I am referred clients from a local GP, and from an agency who provide CBT services for trauma/PTSD, as well as a few self-referrals. My private clients tend to present with depression and anxiety, workplace stress, and PTSD.</p> <p>I expect to be involved in a significant research project over the next two years which will evaluate the effectiveness of the IAPT service.</p>

CRITERION THREE: Continuing Professional Development (CPD)

For your annual CBT related CPD you are expected to complete Reflective Statements showing engagement in a minimum of five activities drawn from across the range of listed acceptable types of learning and development activities. You are required to complete a separate reflective statement for each. Within this, you are required to include at least six hours of skills workshop(s) and complete reflective statements for these. You must provide evidence for each activity.

Refer to Guidelines and Examples for Completion of Reflective Statements for additional information.

Confirm that you have enclosed your CBT CPD Reflective Statements and supporting evidence.

Provide your Reflective Statements of Continuing Professional Development for the 12 months since your Provisional Accreditation was granted, which should evidence at least five CPD activities including at least six hours from a CBT Workshop/s and provide supporting evidence (copies only, do not include originals).

I enclose my Reflective Continuing Professional Development Statements for the last 12 months including supporting evidence

YES

CRITERION FOUR: CBT Clinical Supervision

This section is about CBT Specialist Clinical Supervision received only (Criterion Four).

Provide a summary of your CBT Clinical Supervision arrangements for the 12 months since your Provisional Accreditation award.

CBT Clinical Supervision is not the same as professional or managerial supervision (although these may be provided by the same person as Clinical Supervision). Also, Clinical Supervision is something more than professional consultancy.

Supervision should be provided by an appropriately qualified BABCP Accredited Practitioner or equivalent.

Applicants should be receiving regular Supervision, which means a minimum of one and a half hours per month total supervision time for a full time practitioner; this can be taken to mean an average, providing the contact is regular, to accommodate individual circumstances. Accreditors will be looking for evidence that sufficient Supervision arrangements are available to the applicant, in respect of the case-load of their clinical practice and level of expertise. For those working less than half time clinical work, accreditors are flexible in consideration of the Supervision time required. This is evaluated on an individual basis.

All time spent in group supervision will count with the provisos that the group must be no more than six members, all group members must present their own material regularly, and that the applicant member must have an opportunity for individual Supervision should it be needed, or quickly available alternative supervision, e.g. advice in a crisis situation. For the sake of clarity, it is considered that the minimum of one and a half hours of group supervision alone would be inappropriate for a full-time experienced clinician.

Types of Supervision may be individual, in a CBT Supervision Group, peer review, telephone, or by e-mail (but not telephone or e-mail alone – there must be some direct personal contact on occasions).

Provide details as requested, including the date of Supervision contact, whether individual, group or peer, the name of the Supervisor or members of the group, including facilitator, the duration of the contact, details of the content of the Supervision, and the methods used.

Content of Supervision refers to the kind of material reviewed, including case reviews and discussions, techniques, skills, practice, theory, etc. Methods of Supervision refers to the way the supervision is undertaken, including case presentations, role-play, telephone or e-mail contact, and MUST include, on a regular basis, the use of in-vivo, video or audio recording assessment, preferably using formal skills measures, e.g. CTS-R.

A variation has been agreed for the standard set for live sampling as part of supervision. In circumstances where this is impossible to obtain (eg in forensic settings employer refusing consent for visiting supervisor; in learning disability settings, client unable to give informed consent), then supervisor can account for this within the report.

CRITERIA & GUIDELINES FOR FULL ACCREDITATION

Summarise your CBT clinical supervision and support arrangements for the past 12 months; include your ongoing current arrangements.

Dates From & To	Individual / Group / Peer	Name of Supervisor; or No. of People in Group and Name of Facilitator	Frequency of Contact	Duration of Contact	Content	Method/s
Mar 09 - date	Group	Dr Martin Bowers – group of 3 supervisees	Monthly	2 hours	Case reviews, role-play, review of literature/research. I present a video of a whole or part session on alternate months	Video assessment using CTS-R, case presentations
Oct 13 - date	Individual	Sandra Phillips	Monthly	1 hour	Case reviews, formulations, discussions about theory. I present a video of whole sessions approximately every 3 months	Video assessment using CTS-R, case presentations, telephone and e-mail support

Provide your completed Log Book of CBT Clinical Supervision for the 12 months since you were awarded Provisional Accreditation, which should demonstrate at least one and a half hours per month of CBT Clinical Supervision (Criterion Four).

Refer to Guidelines and Examples for Completion of Supervision Log Books for additional information.

One Supervisor's Report is also required. The Supervisor's Report must be from your current CBT Clinical Supervisor. You are responsible for obtaining the Supervisor's Report and including it with your application. This should be given to you in a sealed envelope, although it is up to the provider if they wish to show you it.

A sample Supervisor's Report is available; please provide this to your Supervisor to assist them in completing their form, which will ensure Accreditors are provided with all of the information they require. The Supervisor's Report should be typed, not handwritten. You should inform your Supervisor of where to find the downloadable Word document.

The Supervisor's Report should be signed and dated within the last month.

If you have been receiving clinical supervision from your current Supervisor for less than six months, you must also provide a Supervisor's Report from your previous Supervisor.

Evidence of good practice will be assessed on the basis of the Supervisor's Report, these include

- details of the use of live supervision, including illustrative examples of practice (Supervisor's Report)
- an understanding and appropriate practice of the development, maintenance and ending of therapeutic relationship – such issues as not enabling collaboration and client choice, the misuse of power in the client-therapist relationship, and the role of value systems may all be addressed
- the applicant's general competency, skills and attitudes to practice CBT
- the applicant's adherence to the Standards of Conduct, Performance and Ethics for members

The choice of current CBT Supervisor is with you. However, Accreditors will wish to see evidence of the Supervisor's competence to offer CBT Supervision. Supervisors will either be Accredited Practitioners with the BABCP, or will be senior professionals who have training and qualifications in CBT, and will be practicing CBT. In the case of applicants who have been senior practitioners in, and contributors to, the practice of Cognitive and/or Behavioural Psychotherapies, Accreditors will be looking for evidence of commitment to the formal use of colleagues for the Supervision of case work and personal issues which may arise from working with clients.

Confirm that you have enclosed your CBT Clinical Supervision Log Book and Supervisor's Report.

CRITERIA & GUIDELINES FOR FULL ACCREDITATION

Provide your Log Book of CBT Clinical Supervision for the 12 months since your Provisional Accreditation was awarded, which should evidence at least one and a half hours per month of clinical supervision, including regular live (in-vivo, video, audio) assessment.

Variations/ exceptions: if a supervision live element is impossible (i.e client group unable to consent, employer prevents live or external supervision access, setting provider doesn't approve/validate live) then supervisor can account for this within the report.

You must also provide a Supervisor's Report from your current CBT Supervisor, which must be dated within the last month. If you have been receiving clinical supervision from your current Supervisor for less than six months, you must also provide a Supervisor's Report from your previous Supervisor.

I enclose my Log Book of Clinical Supervision for the last 12 months	YES <input checked="" type="checkbox"/>
I enclose my Supervisor's Report, from my current Supervisor, dated within the last month	YES <input checked="" type="checkbox"/>
I enclose my Supervisor's Report, from my previous Supervisor (<i>only required if had current Supervisor for less than six months</i>)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

CRITERION FIVE: Sustained Commitment

Ensure that you sign and date the form here

Full Accreditation is for 12 months, after this, members are reaccredited annually by making a yearly online declaration of fulfilling the required standards for CBT practice, CBT supervision and CBT CPD. This is verified by random audit.

It is recommended that you maintain Reflective Statements evidencing five CPD activities and including at least six hours from a CBT Workshop/s per year, evidence of at least one and a hours per month of Clinical Supervision per year throughout the five year period, which must include regular live assessment of your practice (Supervision Log), and a Supervisor's Report.

Variations/ exceptions: if a supervision live element is impossible (i.e client group unable to consent, employer prevents live or external supervision access, setting provider doesn't approve/validate live) then supervisor can account for this within the report.

DECLARATION

I understand my commitment to Continuing Professional Development, and Clinical Supervision

Signature

Claire Dwyer

Date 1 September 2013

Criminal, Civil, Investigatory & Disciplinary Declarations

You must check a box for each of the questions

If you check yes to any question, you must declare the details on a separate signed statement and enclose with your application; you may wish to discuss this with one of the Accreditation Liaison Officers in advance (contact via the BABCP Office); details will be handled with discretion and you may include your statement in a sealed envelope.

All applicants must answer each of the six questions below.

If you answer YES to any question, please declare details on an attached statement.

Question	Declaration	Additional Statement Enclosed	Labelled as
1. Have you ever been convicted of any criminal offence in any court in the UK or elsewhere which might prejudice the public's trust in you, your profession, or the BABCP, if accurately informed about all the circumstances of the case?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Have you ever been found guilty of a civil offence?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Have you ever been refused / expelled from membership of any other professional body / register on the grounds of professional misconduct or other professionally related offence?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Have you ever been the subject of any professionally related disciplinary action (which may or may not have ended in dismissal)?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Are you currently / likely to be the subject of any criminal, civil, investigatory or disciplinary proceedings or enquiries?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<input type="checkbox"/>	
6. To your knowledge, have you ever been, or are you likely to be involved in a situation or incident likely to result in disciplinary action against you as a member of the BABCP?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	<input type="checkbox"/>	

DELIBERATELY FALSE STATEMENTS WILL RESULT IN YOUR REMOVAL FROM THE LIST OF ACCREDITED MEMBERS

Ensure that you sign and date the form, within one month prior to submitting your application

DECLARATION

I am a Member of the BABCP, and I adhere to the Standards of Conduct, Performance and Ethics in the Practice of Behavioural and Cognitive Psychotherapies.

The information contained in this application and any accompanying papers is accurate to the best of my knowledge.

Signature

Claire Dwyer

Date 1 September 2013

The Accreditation and Registration Committee Reserves the right to seek further information from relevant parties to the application.

Standards of Conduct, Performance and Ethics for Members – Summary Document

Adopted AGM 16 July 2009/Amended Nov 2016

Your Duties as a Member of BABCP: The Standards of Conduct, Performance and Ethics you must keep to in Practice

- You must act in the best interests of service users
- You must maintain high standards of assessment and practice
- You must respect the confidentiality of service users
- You must keep high standards of personal conduct
- You must provide (to us and any relevant regulators and/or professional bodies) any important information about your conduct and competence
- You must keep your knowledge and skills up to date
- You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner
- You must communicate properly and effectively with service users and other practitioners
- You must effectively supervise tasks that you have asked other people to carry out
- You must get informed consent to give treatment (except in an emergency)
- You must keep accurate records
- You must deal fairly and safely with the risks of infection
- You must limit your work or stop practising if your performance or judgement is affected by your health
- You must behave with honesty and integrity and make sure that your behaviour does not damage the public's confidence in you or your practice
- You must make sure that any advertising you do is accurate

Introductory Statement

1. As a member of the BABCP you are required to make sure that you are familiar with the standards and that you keep to them. If you are applying for membership or Accreditation as a CBT Practitioner, Trainer or Supervisor; Psychological Well-being Practitioner (PWP); or Evidence-Based Parent Training Practitioner (EBPTP) you will be asked to sign a declaration to confirm that you have read and will keep to the standards.
2. It is important that you meet BABCP standards and are able to practise safely and effectively. We also want to make sure that you maintain high standards of personal conduct and do not do anything which might affect the public's confidence in you, the BABCP or any profession to which you may belong. However, we do not dictate how you should meet our standards.

Each standard can normally be met in more than one way. The way in which you meet our standards might change over time because of improvements in technology or changes in your practice.

As an autonomous and accountable practitioner, you need to make informed and reasonable decisions about your practice to make sure that you meet the standards that are relevant to your practice. This might include getting advice and support from education providers, employers, your clinical supervisor, colleagues and other people to make sure that you protect the wellbeing of service users at all times.

Many BABCP members are also members of professional bodies and will therefore be bound by codes of practice of those professions. BABCP recognises the valuable role professional bodies play in representing and promoting the interests of their members. This often includes providing guidance and advice about good practice, which can help you meet their standards and those in this document.

3. It is expected that all members of BABCP approach their work with the aim of resolving problems and promoting the well-being of service users and will endeavour to use their ability and skills to service users' best advantage without prejudice and with due recognition of the value and dignity of every human being. If you make informed, reasonable judgements about your practice, with the best interests of your service users as your prime concern, and you can justify your decisions if you are asked to, it is very likely that you will meet our standards.

By 'informed', we mean that you have enough information to make a decision. This would include reading these standards and taking account of any other relevant guidance or laws. By 'reasonable', we mean that you need to make sensible, practical decisions about your practice, taking account of all relevant information and the best interests of the people who use or are affected by your services. You should also be able to justify your decisions if you are asked to.

4. Throughout these standards, we have used the term 'service user' to refer to anyone who uses or is affected by a member's services. Who your service users are will depend on how and where you work. For example, if you work in clinical practice, your service users might be your patients/clients. In some circumstances, your service users might be organisations rather than individuals. The term also includes other people who might be affected by your practice, such as carers and relatives.

We have used the word 'treatment' in its broadest sense to include a number of actions members carry out. These actions could include diagnostic, monitoring or assessment procedures, therapy or advice.

Refer to the FULL document **Standards of Conduct, Performance and Ethics** here: www.babcp.com/Standards-of-Conduct-Performance-and-Ethics