



CRITERIA AND GUIDELINES FOR FULL RE-INSTatement OF ACCREDITATION AS A BEHAVIOURAL AND/OR COGNITIVE PSYCHOTHERAPIST

Re-accréditation is dependent on submission, five years after the date of Full Accreditation or Re-accréditation, of an application for Re-accréditation. Re-accréditation is for a period of five years, after which Accredited members will be required to apply for Re-accréditation, every five years.

If Accreditation has lapsed, it is necessary to make an application for Re-instatement of Accreditation.

Re-instatement of Accreditation is a two-stage process.

Stage One: An application for **Provisional Re-instatement of Accreditation**. This should be made in order to enter the process by confirming current practice and supervision arrangements- and committing to make an application for Full Accreditation Re-instatement 12 months after re-entry to 'The CBT Register UK'.

Stage Two: An application for **Full Re-instatement of Accreditation**. This should be made 12 months after Provisional Re-instatement of Accreditation has been awarded.

These guidelines relate to Stage 2.

The overall process of Reinstatement of Accreditation is not complete until an application for Full Re-instatement of Accreditation has been made, and granted. If an application for Full Re-instatement of Accreditation is not received, or granted, then the practitioner's status of Accreditation will be revoked, and the individual will be removed from the CBT Register UK.

CRITERIA FOR FULL RE-INSTatement OF ACCREDITATION

The following seven criteria must be met in order to gain Re-instatement of Accreditation:

1. Have been previously awarded Full Accreditation and Re-accréditation, if applicable, which has lapsed
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. Having signed a statement of intent at the Provisional Re-instatement phase at Stage 1, to submit an application for Full Re-instatement of Accreditation in 12 months; to now sign a statement in the application for Full Re-instatement of Accreditation of intent to submit an application for Re-accréditation in five years and 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 RE-INSTATEMENT OF ACCREDITATION

All applications must be presented on the most up to date forms relating to Full Re-instatement of 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 Re-instatement of Accreditation** (for information purposes)
- **Application for Provisional Re-instatement of Accreditation** in the first instance, **and Application for Full Re-instatement** at 12 months following the award for Provisional Re-instatement of 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 Example Supervision Log Book and Reflective Statement** (for information purposes)
- **Reflective Statements of CBT Continuing Professional Development** (for completion and submission) for stage 2 you must provide your Reflective Statements for the 12 months prior to making the Full Re-instatement application
- **Log Book of CBT Clinical Supervision** (for completion and submission) – for stage 2 you must provide your logbook for the 12 months prior to making the application

MAKING YOUR APPLICATION

- Check 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 Re-Instatement (Stage 2) of 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 Re-instatement of Accreditation when completing the application form
- Also refer to the Guidelines and Examples for Completion of CBT Log Books & 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	
Confirm you are a member	<input type="checkbox"/>	

Enclosures

Please tick enclosure checklist below when you have included all enclosures

CPD Reflective Statements / Log Book	<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"/>	

CRITERIA & GUIDELINES FOR RE-INSTATEMENT OF ACCREDITATION

An Application for Full Re-instatement of Accreditation can only be made by those who have already received Provisional Re-instatement of Accreditation at Stage 1. You would also previously have been awarded Full Accreditation and Re-Accreditation, if applicable, which has lapsed (Criterion One).

Your application for Full Re-instatement of Accreditation should be made immediately you are able to provide reflective statements / log book and evidence of at least 12 months of CBT CPD and a log book of at least 12 months CBT Clinical Supervision. This will be 12 months after Provisional Re-instatement of Accreditation has been awarded.

Please include that you have been awarded Provisional Re-instatement of Accreditation, and the date of the award.

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

CRITERION ONE: Provisional Re-instatement of Accreditation

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

Confirmation

Date of Award

I have been awarded Provisional Re-instatement of Accreditation

YES

5 September 2002

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).

You are asked to 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: Full-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 08 - 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 13 - date	Cognitive Behavioural Psychotherapist	Private Practice	Local GP Practice, and 'CBT-Trauma'	Private Practice	Depression, anxiety disorders & PTSD	8	100

CRITERIA & GUIDELINES FOR RE-INSTATEMENT OF 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 CBTs, and two psychologists. We meet weekly for case discussions and referrals, and the CBTs 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

Full Re-instatement Stage 2: You must provide your completed Reflective Statements of at least five activities drawn from across the range of listed acceptable types of learning and development activities per year. 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) per year and complete reflective statements for these. You must be able to provide evidence for each activity.

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

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

Provide your Reflective Statements for the 12 months since your Provisional Re-instatement of 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 Statements of Continuing Professional Development 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).

Stage 2 Full Re-instatement: Provide a summary of your CBT Clinical Supervision arrangements for the 12 months following the award for Provisional Re-instatement of Accreditation.

CBT Clinical Supervision is not the same as a 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).

Give 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.

Summarise your CBT clinical supervision and support arrangements for at least the last 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
March 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

CRITERIA & GUIDELINES FOR RE-INSTATEMENT OF ACCREDITATION

Stage 2: Full Re-instatement of Accreditation- Please provide your completed Log Book of CBT Clinical Supervision for the 12 months following the award for Provisional Re-instatement of Accreditation.

Refer to Guidelines and Examples for Completion of Log Books & Reflective Statements 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 and 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 at the point of application, 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 relationships – 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 in the Practice of Behavioural and Cognitive Psychotherapies

The choice of current CBT Supervisor is with you. However, the Committee will wish to see evidence of the Supervisor's competence to offer CBT Supervision. Supervisors will either be BABCP Accredited Practitioners or 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, the Committee 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.

Provide your Log Book of CBT Clinical Supervision for at least the last 12 months, which should evidence at least an hour and a half per month of clinical supervision, including regular live (in-vivo, video, audio) assessment.

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 (only required if had current Supervisor for less than 6 months)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

CRITERION FIVE: Sustained Commitment

Ensure that you sign and date the form here

CRITERIA & GUIDELINES FOR RE-INSTATEMENT OF ACCREDITATION

Full Re-instatement of Accreditation is for a period of five years, after which an application for re-accreditation must be submitted, along with Reflective Statements evidencing five CPD activities and including at least six hours from CBT Workshop/s activity per year, and evidence of at least one and a half hours per month of Clinical Supervision throughout the five year period, which must include regular live assessment of your practice (Supervision Log), and a Supervisor's Report.

DECLARATION

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

Signature

Claire Dwyer

Date 1 September 2013

PLEASE ENSURE THAT YOU SIGN HERE. YOUR SIGNATURE IS REQUIRED IN ORDER TO PROCESS YOUR APPLICATION. IF YOU HAVE NOT SIGNED THIS FORM IN THE APPROPRIATE BOXES IT WILL BE RETURNED TO YOU TO SIGN.

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 2009

PLEASE ENSURE THAT YOU SIGN HERE. YOUR SIGNATURE IS REQUIRED IN ORDER TO PROCESS YOUR APPLICATION. IF YOU HAVE NOT SIGNED THIS FORM IN THE APPROPRIATE BOXES IT WILL BE RETURNED TO YOU TO SIGN.

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

CRITERIA & GUIDELINES FOR RE-INSTATEMENT OF ACCREDITATION

BRITISH ASSOCIATION FOR BEHAVIOURAL AND COGNITIVE PSYCHOTHERAPIES

Standards of Conduct, Performance and Ethics in the Practice of Behavioural and Cognitive Psychotherapies – Summary Document

Adopted AGM 16 July 2009

Your Duties as a Cognitive Behaviour Therapist; The standards of conduct, performance and ethics you must keep to in CBT

- You must act in the best interests of service users
- You must maintain high standards of CBT 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 other relevant regulators and/or professional bodies) any important information about your conduct and competence
- You must keep your professional 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 profession
- 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, 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 CBT 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 professional, 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 other professional bodies and will therefore be bound by codes of practice of those professions. BABCP recognises the valuable role other 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 and professional 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 in the Practice of Behavioural and Cognitive Psychotherapies** for further detailed information www.babcp.com/about-babcp