

Provisional Re-Instatement For Accreditation as a Cognitive Behavioural Psychotherapist Criteria and Guidelines

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'.

These guidelines relate to Stage 1.

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.

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 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-accreditation, if applicable, which has lapsed
2. Be practicing and accountable as a Behavioural and/or Cognitive Psychotherapist
3. Demonstrate ongoing Continuing Professional Development during Provisional Re-instatement year.
4. Have on-going CBT Clinical Supervision during Provisional Re-instatement year.
5. Sign a statement in application for Provisional Re-instatement of Accreditation of intent to submit an application for Full Re-instatement of Accreditation in 12 months at stage 1. Then to sign a statement in the application for Full Re-instatement of Accreditation of intent to submit an application for Re-accreditation in five years at stage 2, and to sustained commitment to the theory and practice of Behavioural and/or Cognitive Psychotherapy which includes Continuing Professional Development, and on-going 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 RE-INSTATEMENT OF ACCREDITATION

All applications must be presented on the most up to date forms relating to 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 Re-instatement of Accreditation** (for information purposes)
- **Application for Provisional Re-instatement of Accreditation** in the first instance, **and Application for Full Re-instatement only** 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 for Full re-instatement of Accreditation at stage 2. 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 Full Re-instatement 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 (at the full re-instatement stage).

Each section of the Provisional Re-Instatement (Stage 1) 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 This is the address used for BABCP correspondence. You will have a choice of a different address for the register if Accredited	44 Any Address, Any Town, Anywhere Postcode 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 if any additional information has been included.

Additional Information (where necessary) Reflective Statements, Clinical Supervision log and Supervisors report plus evidence- (all at stage 2).	<input type="checkbox"/>
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An Application for Re-instatement of Accreditation can only be made by those who have previously been awarded Full Accreditation (and Re-Accreditation, if applicable), which has lapsed (Criterion One).

Your application for Provisional Re-instatement of Accreditation should be made immediately you are able to, in order to enter the process by confirming current practice and supervision arrangements- and committing to make an application for Full Re-instatement of Accreditation 12 months after re-entry onto 'The CBT Register UK'.

Please include that you have previously been awarded Full Accreditation (and Re-accreditation, if applicable), and the date of the last award.

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

CRITERION ONE: Previous Accreditation

Please confirm that you have been previously awarded Full Accreditation (and Re-accreditation), if applicable, and the date of the last award.

Also state the reason why your previous Accreditation lapsed.

Confirmation

Date of Last Award

I have previously been awarded Full Accreditation, or Re-accreditation

YES

5 September 2002

Reason for lapse in Accreditation

I failed to maintain my records and make an application for Re-accreditation

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 your current 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 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

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

Evidence of CPD will be expected when the application is made for Full Re-instatement of Accreditation at **Stage 2**. This refers to the five Reflective Practice Statements including at least 6 hours of CBT skills practice (Refer to Guidelines and Examples for Completion of Log Books and Reflective Practice Statements for additional information)

CRITERION FOUR: CBT Clinical Supervision

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

Evidence of CBT Clinical Supervision and a Clinical Supervisors report will be expected when the application is made for Full Re-instatement of Accreditation at Stage 2 in 12 months- time.

CRITERION FIVE: Sustained Commitment

Ensure that you sign and date the form here.

Provisional Re-instatement of Accreditation is for a period of 12 months, after which an application for Full Re-instatement of Accreditation must be submitted, along with Reflective Statements evidencing five CPD activities and including at least six hours from a CBT Workshop(s), and evidence of at least one and a half hours per month of Clinical Supervision, 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

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 <i>Claire Dwyer</i>	Date 1 September 2009
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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.

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