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			Amount	Cheque No		

**Accreditation as CBT Supervisor:
Application Form Including Criteria and Guidelines**

SAMPLE

Applicant's Name: FRED BLOGGS

Accreditation as a CBT Supervisor with BABCP is for senior and experienced CBT Practitioners who provide significant CBT Supervision.

To be eligible for Supervisor Accreditation, the applicant must have been Fully Accredited as a Practitioner for at least three years. If you apply for Trainer Accreditation simultaneously with Supervisor Accreditation, you will need to complete a separate form.

Supervisor reaccreditation will be through a process of annual online declaration in the same way as Practitioner and Trainer Accreditation, and you must maintain your Practitioner Accreditation in order to remain accredited as a Supervisor. This is verified by random audit.

On the award of your Supervisor Accreditation, the due date for your annual Practitioner Reaccreditation will be extended to synchronise with the Reaccreditation date for your Supervisor Accreditation. This is in order to enable you to make the online declarations for both or all accreditations at the same time.

Eg. If your Practitioner Accreditation were due for renewal in November 2017 and you were awarded Supervisor Accreditation in July 2017, you will not make any online reaccreditation declaration until July 2018, when you would make the declarations for both Practitioner and Supervisor Reaccreditation at the same time.

If you were to subsequently apply for Trainer Accreditation, all three Reaccreditation dates would be synchronised with the anniversary of the award date of the Trainer Accreditation.

Enclosures

Please tick enclosure checklist below when you have included all enclosures

Application Fee payable to BABCP <small>(check the BABCP website for current fees)</small>	<input checked="" type="checkbox"/>	Return all documentation to: BABCP Imperial House Hornby Street Bury BL9 5BN 0161 705 4304 babcp@babcp.com
Supervisory Reference	<input checked="" type="checkbox"/>	
Supervisory CPD Reflective Statements	<input checked="" type="checkbox"/>	
Certificates / Evidence of Supervisory CPD	<input checked="" type="checkbox"/>	
Supervisee's Feedback Reports	<input checked="" type="checkbox"/>	
Additional Information <small>(where necessary)</small>	<input type="checkbox"/>	

CRITERIA FOR SUPERVISOR ACCREDITATION

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

1. Be Fully Accredited with the BABCP for a minimum of three years as a CBT Practitioner.
2. Be a dedicated CBT Practitioner.
3. Have treated a significant number of clients from a spectrum of complexity and a variety of problem areas using CBT, under regular CBT Supervision.
4. Be receiving regular and appropriate Supervision and support for CBT Supervisory Practice.
5. Evidence ongoing Continuing Professional Development (CPD) as a CBT Supervisor – a minimum of one activity per year.
6. Be providing regular specialist CBT Supervision – a minimum of 80 hours over the past two years.
7. You must have made your annual online Reaccreditation declaration **as a practitioner** within the last twelve months and have been successful in any audit that has been undertaken. (This will not apply before May 2018.)

GENERAL NOTES ON MAKING AN APPLICATION FOR SUPERVISOR ACCREDITATION

- The application must be signed and dated within one month of receipt.
- The application should be typed and not handwritten.
- You will be required to provide the following with your application:
- **Reflective Practice Statements of CBT Supervisory Continuing Professional Development (CPD):** You must complete a minimum of one supervisory CPD activity per year.
- **Supervisory Reference:** this must be completed by an experienced and dedicated CBT Practitioner who provides Supervision or support of your CBT Supervisory Practice. This document should be completed and signed within three months prior to your application submission. A Supervisory Reference SAMPLE is provided.
- **Supervisee's Feedback Report:** a minimum of two of these must be completed by current or recent Supervisees. These documents should be completed and signed within two years prior to your application submission. A Supervisee's Feedback Report SAMPLE is also available to download.

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.

APPLICANT'S DETAILS

Full Name	Fred Simon Bloggs						
Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Dr <input checked="" type="checkbox"/>	Prof <input type="checkbox"/>	Other (state)
Profession	Counselling Psychologist						
Job Title	Consultant Cognitive Behavioural Therapist						
Address <small>This is the address used for BABCP correspondence.</small>	100 Any Address Any Town Anywhere		Post Code ANY ONE				
Tel	07700 901234						
E-mail	fred.bloggs@anyemail.com						

TRAINING AND QUALIFICATIONS

CRITERION ONE: Previous Practitioner Accreditation

This section is about your previous Accreditation Status.

You should have been Fully Accredited for at least three years before making your application for Supervisor Accreditation.

Please confirm that you have either been awarded Full Accreditation or Reaccreditation as a CBT Practitioner, and the date of the last award

Select One

Date of Last Award

Confirmation	Select one	Date of Last Award
I have been awarded Full Accreditation as a Practitioner	YES <input type="checkbox"/>	
I have been awarded Reaccreditation as a Practitioner	YES <input type="checkbox"/>	

CRITERION TWO: Accountable and Dedicated CBT Practice

Give a summary of the last two years of your Supervisory Practice arrangements, as well as your clinical practice and training roles if the latter is relevant. A fuller log of supervision provided is required later in Criterion Five – this is just a summary here. This section is designed to give the accreditors the context of all your CBT work.

For your **Professional CBT Clinical, Supervisory and Training Practice** (if applicable), give details of the **last two years** of your practice, including client population and setting.

As a Clinician:

Dates	Professional Position	Employed By (or Private Practice)	Professionally Accountable To	Clinical Setting	Client Population	Hours per Week	Total % Involving CBT
2001-Nov 2009	Counselling Psychologist (CBT Specialist)	An NHS Trust, Somewhere	Senior Consultant, Mr Harry Singh	In patients and other secondary care services	Severe & Enduring Mental Health	Full time	70
Nov 2009-date	CBT	Another NHS Trust, Somewhere	Professional Lead, Ms Cynthia Jones	Out patients specialist clinic	Personality Disorders and PTSD	16 hours	50
Nov 2009-date	CBT	Private Practice	Local GP, Rehabilitation Agency	Private Practice	Axis 1, depression, anxiety, trauma	10 hours	100

As a Supervisor:

Dates	Professional Position	Employed By (or Private Practice)	Professionally Accountable To	Setting	Supervisee Population	Hours per Week	Total % Involving CBT
2004-9	Consultant Clinical Psychologist (CBT Specialist)	An NHS Trust, Somewhere	Senior Consultant, Mr Harry Singh	In patients and other secondary care services	Supervising Couns & Clin Psychs qualified and in training	10 hours	50
Nov 2009-date	CBT	Another NHS Trust, Somewhere	Professional Lead, Ms Cynthia Jones	Out patients specialist clinic	Supervising Couns & Clin Psychs qualified and in training, & counsellors training in CBT	12 hours	75
Jan 2009-date	IAPT HI Supervisor	A Named University	Mary Johnson, Course Director	IAPT HI Course	Trainees from IAPT HI Course, individual & group	6 hours	100

March 2010-date	Peer Supervisor	Private Practice	Local GP, Rehabilitation Agency	Private Practice	Monthly peer supervision group (x4) focussed on Compassion Focussed Therapy	2 hours per month	100
March 2010 - date	Self-employed CBT	Private Practice	Local GP, Rehabilitation Agency	Private Practice	Private qualified and trainee CBTs	2 hours per month	100

As a Trainer (if applicable)

Dates	Professional Position	Employed By (or Private Practice)	Professionally Accountable To	Training Setting	Trainee Population	Hours per Week	Total % Involving CBT
2007-2009	Counselling Psychology Lecturer	A Named University	Jack King, Course Director	In patients and other secondary care services	Couns & Clin Psych trainees on doctoral training	6 hours	50
Jan 2009-date	CBT Lecturer	A Named University	Mary Johnson, Course Director	IAPT HI Course	HI trainees	6 hours	100
2009 - date	Workshop Presenter	BABCP local Branch	BABCP Branch Chair, Jimmy Ravenscroft	Various workshops	CBTs at various levels of development	14 hours per year	100
Feb – July 2009	CBT Trainer	A Named Counselling Charity	Laura Bird, Counselling Services Manager	Counselling service	Qualified counsellors wanting into to CBT	70+ hours per year	100

Additional Information: Provide a narrative & reflective statement of not more than 500 words of your CBT clinical experience **since becoming fully accredited** which shows that you have treated a minimum of 50 CBT clients, of which at least 10 were severe and complex, chronic cases; all cases should have been under regular CBT Clinical Supervision

I undertook two CBT placements during my psychology training. The first placement in 1985-86 was an in-patient settings treating clients with a variety of moderate conditions, including chronic depression, OCD, panic disorder. The second placement in 1987 was in a learning disabilities unit and clients predominantly presented with moderate anxiety disorders and depression.

I was employed as a counselling psychologist with Named NHS Trust from 1989 to 1997, where approximately 25% of my clinical practice was using CBT with clients with mild to moderate conditions, significantly depression, social phobia, GAD, panic and agoraphobia, OCD and issues of low self-esteem. I was particularly interested in OCD during this period and developed an intense behavioural programme.

From August 1997 to July 2003 I worked in a specialist CBT clinic for Named Trust. I was seeing about 15 clients per

week for individual CBT and was providing 10-30 sessions of formulation-based therapy. During that time I undertook my PG Diploma in CBT and also gained a qualification in Schema Therapy, and gradually began working with more complex clients, including personality disorder. Although all clients met criteria for an anxiety disorder or depression, most showed moderate-high levels of co-morbidity with both Axis I and Axis II disorders. In addition to the more common there were two cases of Body Dysmorphic Disorder, and at least two challenging cases with people with sequelae of earlier substance abuse. I developed a special interest in clients with a history of childhood sexual abuse who presented with various combinations of recurrent depression, post-traumatic stress and features of borderline personality disorder.

During this period I was receiving fortnightly CBT supervision from the Head of Service, Dr Experienced, (a BABCP member since 1981 and who had trained at IOP in the early-eighties including a year with Professor Marks), and monthly group CBT supervision / case discussion with the other members of the team who included two ENB 650 trained nurses and one graduate from each the Oxford and Newcastle courses. For the CSA work that I was doing, I sought out monthly supervision for 10 months from Dr Understanding, also a BABCP member, who has written extensively on this subject.

I wanted to develop my skills to extend to working with adolescents, and in August 2003 undertook a four month closely supervised placement in the Trust's Child and Adolescent services department, using a Family CBT approach.

From January 2004 to November 2008 I worked in an adult mental health service in the same Trust in an in-patient setting working with severe and enduring mental health problems, and developed my skills specifically working for the first time with psychosis, under the supervision of Dr Expert. I also treated several cases of Bipolar Disorder (stabilised on medication).

In November 2008 I developed a small private practice, and started working part-time for Named NHS Trust in an out-patient speciality service. Although part of the work is supporting two CMHTs, I have retained 2 sessions of individual CBT, seeing 4-6 clients per week, mostly for twenty sessions or more treating personality disorders. I have fortnightly peer supervision with Dr Curious (who had worked for two years with David Clark's team at Oxford in the early nineties). My Private Practice involves working with mild to moderate presentations and I work with Compassion Focussed Therapy.

CRITERION THREE: Specialist CBT Supervisory Supervision

This section is about CBT SPECIALIST SUPERVISORY SUPERVISION ONLY

Provide a summary of your CBT Supervisory Supervision arrangements for the last two years. This should total at least 5% of your overall supervisory practice or one hour per month whichever is most appropriate for the supervisor's current supervisory practice. For example, if you supervise ten hours a month, 5% of ten is 0.5, so you should be receiving at least thirty minutes of supervisory supervision per month, if that feels sufficient and appropriate.

Accreditors will be looking for evidence of commitment to the formal use of appropriate colleagues for the Supervision of your work, including personal issues that may arise from your Supervisory Practice.

If you have supervisory supervision with the same person who provides you with your clinical supervision, you must be clear that you are not including the clinical supervision here. For example, if you have a one-and-a-half-hour session per month in which you spend one hour on Supervision of Clinical Practice and half an hour on Supervision of Supervisory Practice, you would list here that your supervisory supervision is half an hour duration monthly.

A Supervisory Reference is required. This must be from your current CBT Supervisory Supervisor. This may be sent to you by your supervisor for you to include with the application. If he/she prefers, the supervisor can confidentially email the reference directly to the BABCP using the email address: accred.reports@babcp.com. Please ask your supervisor to save the reference using your full name followed by "Supervisory Reference". Eg. If your name is Susan Brown, the supervisor names the Word document "Susan Brown-Supervisor Reference", so this is the name that will appear on the attachment when it arrives at the BABCP.

You are responsible for obtaining the Supervisor's Reference and including it with your application, or letting your supervisor know that your application has been submitted and ensuring that the reference is emailed directly **within one month** of you submitting your application. **If the reference is not sent within this period, it may significantly delay the processing of your application.**

A sample Supervisory Reference is available; please provide your Supervisor with this or inform him/her where to find the downloadable documents. This will help to ensure that the accreditors get all the information they need.

The Supervisory Reference should be signed and dated within the last three months before submission. Electronic signatures are acceptable.

Evidence of good practice will be assessed on the basis of the Supervisory Reference, this includes:

- details of the use of Supervision, including illustrative examples of Supervisory Practice
- an understanding and appropriate practice of the development, maintenance and ending of Supervisory relationship – such issues as not enabling collaboration and Supervisee choice, the misuse of power in the Supervisee-Supervisor relationship, and the role of value systems may all be addressed
- the applicant's general competency, skills and attitudes to CBT Supervision
- the applicant's adherence to the Standards of Conduct, Performance and Ethics in the Practice of Behavioural and Cognitive Psychotherapies.

The choice of person offering Supervision or support of your current CBT Supervisory Practice is with you. However, Accreditors will wish to see evidence of the Supervisor's competence to offer Supervision or support. All of your Supervisory Supervision or support might not necessarily be from a CBT Practitioner. However, you need to show how your arrangements are appropriate to support your CBT Supervisory Practice. At least some of your Supervisory Supervision or support should be from a qualified CBT therapist, and the Supervisory Reference should be from a qualified CBT, or a rationale for an alternative arrangement provided.

3.CBT Supervisory Supervision

Summarise your **CBT Supervisory Supervision** and support arrangements **for the last two years**; include your on-going current arrangements. This should total at least 5% of your overall supervisory practice or one hour per month whichever is most appropriate for the supervisor's current supervisory practice.

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
2010-11	Group	John Marsh; x3 supervisees	Monthly	2 hours	Learning theories, models of supervision, case presentation and discussion, personal and supervisee issues, issues of risk & vulnerability	Case presentations and discussion
Jan 2010-date	Peer Group	Rotating facilitation; Sarah May, Paul Brown & Helen Strong	Monthly	2 hours	Learning theories and trainee placement and course needs, models of supervision, case presentation and discussion, personal and supervisee issues, issues of risk & vulnerability	Video assessment using STARS Case presentations and discussion
Dec 2010-date	Individual	Kath French	Bi-monthly	2 hours	Models of supervision, case presentation and discussion, personal and supervisee issues, issues of risk & vulnerability	Video / audio assessment using STARS Case presentations and discussion

I have included my Supervisory Reference from my current Supervisory Supervisor, dated within the last three months	YES <input checked="" type="checkbox"/>
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OR

My Supervisory supervisor is emailing my Reference direct to accred.reports@babcp.com within one month of my submitting this application	YES <input type="checkbox"/>
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CRITERION FOUR: CBT Supervisory Continuing Professional Development (CPD)

4. Supervisor Continuing Professional Development

Provide Reflective Statements of Continuing Professional Development related to your development as a supervisor for **the past two years**. You should provide evidence of at least one activity from the list in the guidelines per year.

This section is about your sustained commitment to CBT Continuing Professional Development for your Supervisory Practice only. Clinical CPD should be recorded in your practitioner reaccreditation records, but you may use one supervisory CPD activity per year as part of your practitioner CPD – so you may have one CPD activity per year which is duplicated in this application and your practitioner records.

You are required to complete one reflective statement for each year **for the past two years**. You also need to provide evidence for the activities which should be included with the application.

For your annual CBT Supervisor related CPD you are expected to engage in a minimum of one activity per year.

Acceptable Supervisory CPD Activities:

There are many activities that could be included as evidence of sustained commitment to development as a CBT Supervisor. The activities need to be specifically related to CBT supervision. The list below is not exhaustive and you may include other activities if you can justify in your Reflective Log that they contribute to your skills and development as a CBT Supervisor. Accreditors would expect you to demonstrate their relevance to this. Activities might include:

- attendance at workshops
- courses relating to CBT Supervisory Practice and skills
- attendance at conferences and seminars relating to CBT Supervisory Practice
- involvement in relevant research
- relevant publications by you
- reading relevant books and journals etc.
- involvement with Supervision SIGs,
- relevant media involvement.

The hours spent developing CBT Supervision services may count once only.

Providing CBT Supervision, and undertaking Supervisory Supervision do not count as relevant CPD activity.

Please ensure all attachments are appropriately labelled eg 4.1

I include reflective statements for the Supervisor CPD I have completed in the past two years

YES

I include evidence of the Supervisor CPD I have completed in the past two years

YES

CRITERION Five: Provision & Quality of CBT Supervision

This section is about the CBT Supervision which you provide.

If applying for Supervisor Accreditation you need to show you have provided at least **80 hours** of CBT Supervision over the **past two years** and have evaluations of this Supervisory Practice from Supervisees, and / or other external verification means such as reports from Course Directors / Supervisors for whom you have provided Supervision.

Delivery of supervision provided by Skype, including to overseas supervisees, provided you are in the UK, can count towards the supervision total. Peer supervision is acceptable so long as the claim is only for hours providing.

Complete the table 5 - Provision of Supervision.

You need to indicate in the field 'Feedback Report Enclosed' which evaluations you are submitting. You should normally obtain Supervisee's Feedback Reports from one in five of your Supervisees, but there needs to be a minimum of two Supervisee's Feedback Reports, and no more than five.

Supervisees' Feedback Reports should be from recent or current Supervisees. These may be sent to you by your supervisees for you to include with the application. If they prefer, the supervisees can confidentially email their reports directly to the BABCP using the email address: **accred.reports@babcp.com**. Please ask your supervisees to save the reports using your full name followed by "Feedback". Eg. If your name is Susan Brown, the supervisees name the Word document "Susan Brown-Feedback" so this is the name that will appear on the attachment when it arrives at the BABCP. Please ask them to put the file name (eg Susan Brown-Feedback) in the subject field of the email.

You are responsible for obtaining the Supervisees' Feedback Reports and including them with your application, or letting your supervisees know that your application has been submitted and ensuring that the reports are emailed directly **within one month** of you submitting your application. **If the feedback reports are not sent within this period, it may significantly delay the processing of your application.** The same process will apply if your supervisor evaluation is being sent by someone else providing external verification of your supervisory role.

A sample Supervisee's Feedback Report is available; please provide this to your Supervisee to assist them in completing the form, which will ensure the Accreditors have all of the information they require. The Supervisee's Feedback Report should be typed, not handwritten. You should email your Supervisee the downloadable Word documents or advise them where to access them.

The Supervisees' Feedback Reports should be signed and dated within the last two years. Electronic signatures are acceptable.

Please label them for easy reference, for example write "5.1" at the top of the page.

5. Provision of Supervision

Give details of at least 80 hours of the CBT Clinical Supervision you have provided **over the last 2 years**, and indicate which Supervisees have provided Supervisee's Feedback Reports.

Dates From & To	Supervisee Name	Supervisee Status	Supervisee Clientele	Content	Methods	Duration & Frequency	Total No. Hours	Sponsor / Employer	Feedback Report Included	Labelled as
Jan 2011- Nov 2012	Paula Verity, Louise Carter, Harvey Wallbanger	Couns & Clin Psych Doctoral trainees on CBT placement	Adult in-patient secondary care – moderate depression, anxiety disorders and bipolar disorder	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills	Joint assessments and therapy, in-vivo assessments & video tapes scored on CTS-R, role play, case presentations & discussions	Weekly group x2 hours and individual x2 hours	220	A Named NHS Trust	<input type="checkbox"/>	
Nov 2012- July 2013	Nick Parker, Hosanna Van Der Watt	Couns & Clin Psych Doctoral trainees on CBT placement	Adult out- patient specialist CBT Clinic – mild to moderate depression, anxiety disorders	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills	Joint assessments and therapy, in-vivo assessments & video tapes scored on CTS-R, role play, case presentations & discussions	Weekly individual x2 hours	60	Another Named NHS Trust Somewhere	<input type="checkbox"/>	
Nov 2010- date	Katherine James	Couns Psych Doctoral graduate	Adult out- patient specialist CBT Clinic – moderate to severe / complex depression, anxiety disorders, bipolar, PDs	Formulation, key and advanced interventions and techniques, therapeutic relationship skills	Video tapes scored on CTS-R, role play, case presentations & discussions	Weekly individual x1.5 hours	100	Another Named NHS Trust Somewhere	<input checked="" type="checkbox"/>	5.1
Jan 2011 - date	Graham Swift	Counsellor training on PG Dip in CBT, A Named University	Adult out- patient specialist CBT Clinic – mild to moderate depression, anxiety disorders	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills	Joint assessments and therapy, in-vivo assessments & video tapes scored on CTS-R, role play, case presentations & discussions	Fortnightly individual x 2 hours	130	Another Named NHS Trust Somewhere	<input checked="" type="checkbox"/>	5.2

Jan 2013– Dec 2013	Kelvin Smith	RMN training on IAPT HI course	IAPT CBT clients – mild to moderate depression and anxiety disorders	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills plus some general case management supervision	Video tapes scored on CTS-R, role play, modelling, case presentations & discussions	Weekly individual x 1 hour	44	A Named University	<input checked="" type="checkbox"/>	5.3
Jan 2011 – Dec 2011	Aisha Lawn, Dagmar Niebuhr, Nancy Green	Graduate Mental Health Worker & RMNs training on IAPT HI course	IAPT CBT clients – mild to moderate depression and anxiety disorders	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills	Video tapes scored on CTS-R, role play, modelling, case presentations & discussions	Weekly group x2.5 hours (term time)	60	A Named University	<input type="checkbox"/>	
Mar 2012	Tisha Ingrams, Fiona Small, James Kennett	Qualified CBTs in Private Practice	Adult private clients and clients from referring agencies mainly with history of abuse or PTSD	Specific focus on trauma / PTSD using a Compassion Focussed Therapy approach	Case presentations and discussions	Monthly peer group x2 hours	20	Private arrangement	<input checked="" type="checkbox"/>	5.4
Mar 2013	Chuck Berry	Counsellor training on BSc in CBT, A Named University	Short term CBT for adult clients in private counselling service – mild to moderate depression, anxiety disorders	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills	Video tapes scored on CTS-R, role play, modelling, case presentations & discussions	Every 6 weeks x2 hours	20	Named Private Counselling Service	<input type="checkbox"/>	
Jan 2014	Heather Wilkinson	Counsellor training on BSc in CBT, Another Named University	Adult clients in charity counselling service – mild to moderate depression, anxiety disorders and CSA	Development of core skills, formulation, key interventions and techniques, therapeutic relationship skills	Mostly telephone / SKYPE supervision (meeting face to face annually), video tapes scored on CTS-R, case presentations and discussions	Monthly individual x 1.5 hours	6	Named Charitable Counselling Service	<input checked="" type="checkbox"/>	5.5
									<input type="checkbox"/>	
							TOTAL No. HOURS	660	TOTAL No. EVALUATIONS	5

I include my Supervisees Feedback forms

YES Number included : 1

AND/OR

My supervisee(s) is/are emailing my Feedback Reports direct to accred.reports@babcp.com within one month of my submitting this application

YES Number emailed : 2

Additional Information and Attachments

Please provide here any further information that it would be useful for the Accreditor to know. .

Additional Information

I was on maternity leave from April 2014- April 2015. Additionally, I had a break in practice due to illness from January -March 2016. My Supervisory supervisor was sick from February – April 2013.

CRITERION SIX: CBT Sustained Commitment

Supervisor reaccreditation will be through a process of annual online declaration in the same way as Practitioner and Trainer Accreditation, and you must maintain your Practitioner Accreditation in order to be reaccredited as a Supervisor. This is verified by random audit.

On the award of your Supervisor Accreditation, the due date for your annual Practitioner Reaccreditation will be extended to synchronise with the Reaccreditation date for your Supervisor Accreditation. This is in order to enable you to make the online declarations for both or all accreditations at the same time. All forms of Reaccreditation declarations will be subject to checking by random audit.

By making the declaration below, you are committing to keep the following over the next twelve months, which will be required in the case of audit:

- 20 hours of CBT Supervisory Practice
- One piece of evidence and/or Reflective Statement of Supervisory Practice Continuing Professional Development
- The appropriate hours of regular Supervisory Supervision (minimum three hours total)

The following will also need to be produced in the case of audit:

- Collaborative Supervisory Supervision Logbook (signed by yourself and your supervisor)
- One Supervisee Feedback Report (for the preceding 12 months)

In the case of audit of your Supervisor Accreditation, you would be expected to provide the above within three months of the notification of the audit. BABCP recommends that you keep these records contemporaneously.

DECLARATION

I understand my commitment to ongoing Supervisory Practice, Continuing Professional Development, and Clinical and other relevant Supervision

Signature

Date

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.

All applicants must answer each of the six questions below.

If you answer YES to any question, please declare details on an additional 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 checked="" type="checkbox"/> NO <input type="checkbox"/>	<input checked="" type="checkbox"/>	Env. labelled Confidential
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"/>	

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

Date

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 Committees Reserve the right to seek further information from relevant parties to the application

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

- **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 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 **BABCP Standards of Conduct, Performance and Ethics in the Practice of Behavioural and Cognitive Psychotherapies**: www.babcp.com/Standards-of-Conduct-Performance-and-Ethics