

Annual Report – Academic Year 2021-2022

ANNUAL REPORT TO THE TRAINING COUNCIL OF THE ACP

1. Summary of Management Structure, Staffing and Resources

The funding for the Scottish training is provided by NES, the education and training body for NHS Scotland. Human Development Scotland was successful in securing another contract to deliver the four year Doctoral Child and Adolescent Psychoanalytic Psychotherapy Training. This began, with five Trainees, in October 2021, all of whom are registered with the ACP.

There has been no change in the roles of Joint Course Leads of the Training. There was a successful re-accreditation in March 2019 when we received excellent feedback with no conditions.

Our partnership with Robert Gordon University continues and our working relationship with the School of Applied Social Studies (SASS) has grown and developed over the last year.

Organisational Structure

The management structure of Human Development Scotland is unchanged since the previous annual report. The organisation is governed by a board of trustees made up of practitioners from within Human Development Scotland membership and trustees appointed from elsewhere who bring complementary skills and knowledge to support the effective governance of the charity. Human Development Scotland is an incorporated charity regulated by the Office of the Scottish Charity Regulator.

In July 2016, Human Development Scotland was accepted as a Pilotlight partner charity. Pilotlight is a charity which works with other charities throughout the UK, helping them to grow and develop into strategically strong, efficient and sustainable organisations. The project concluded in March 2018 by which time Pilotlight had supported the Human Development Scotland board to develop a new vision and mission statement along with a twelve month strategic plan. Both have psychodynamic ways of working at their heart and provided the board

of trustees with greater clarity about the needs, obligations and opportunities for Human Development Scotland in the immediate and longer terms.

The Child and Adolescent Training is overseen by The Training Committee, a subcommittee of the Human Development Scotland Board of Trustees which delegates to it responsibility for overseeing the governance of the training programme including all matters relating to standard setting and monitoring, quality assurance, trainee progress, monitoring and qualification, and curriculum development. The Training Committee meets termly. Its membership includes: the Chair of Training; Joint Course Leads; senior members of the child psychotherapy and psychoanalytic professions; and representatives of NES; 8 members in total, including a recently qualified CAPT.

As well as providing guidance on how to address any concerns about the training that may arise, the committee has the following responsibilities:

1. To oversee and support the work of the Course Leads and the teaching team in:
 - Monitoring and maintaining academic standards and the quality of the student experience
 - Ensuring academic and professional coherence
 - Developing the programme curriculum
 - Monitoring student progress and assessment mechanisms
 - Maintaining relationships with NHS boards hosting trainees, other academic and clinical stakeholders and professional bodies, and other HDS academic programmes
 - Monitoring review mechanisms and procedures for improving the quality of the programme(s)
 - Promptly considering External Examiner reports and other external inputs and feedback in relation to the training and its delivery
 - Ensuring that the training meets the requirements and standards of ACP accreditation and academic validation.

2. To inform the HDS Board of Trustees about the progress and development of the course.

Human Development Scotland premises are based in the city centre of Glasgow and provide good provision for training with a self-contained training suite plus three additional seminar rooms and a library. There is a large training suite that is suitable for larger events and comfortably holds up to 50 people. Video conferencing facilities are available for supervision, group discussion and larger events.

3. Staffing

The core staff team includes the two joint Course Leads and four other senior CAPTs who teach theoretical and clinical seminars. A key component of the philosophy of the Scottish training is to invite senior members of the profession to bring their expertise and experience to the

clinical training and contribute to the programme. Professionals from other disciplines also contribute in order to enhance the learning of trainees and provide an insight into contemporary practice in the NHS and third sector organisations. Robert Gordon University contributes to the programme planning and delivery of the research component of the course. This is done by face-to-face student contact, as well as video link. RGU are providing doctoral level supervision, alongside a CAPT supervisor, to those Trainees who are going forward with the research component of the training. All of the current cohort are engaged in research and, going forward, this is the level expected of all Trainees.

An organisational consultant meets with the Trainees as a group once a term to support their learning and development. This allows Trainees to recognise and learn from the emotional life of the group, the training organisation and the workplace.

The course is supported by an academic administrator, whose weekly hours are 0.75, with a significant proportion of these dedicated to the CAPT Training. Although not all of these hours are for the CAPT Training the administrator is a valuable resource for the course. Further administrative support is also available from the Human Development Scotland staff team when required.

3. CPD for Staff

CAPTs employed to teach on the clinical training are all members of the Association of Child Psychotherapists. Members of the ACP report on their clinical work and Continuing Professional Development on an annual basis. This is required as part of their professional registration. Tutors are encouraged to attend the Annual Conference of the ACP, as well as other relevant conferences. Core staff attend key conferences and trainings throughout the year.

The majority of our staff members are employed within NHS posts, and so have access to trainings and relevant mandatory courses that relate to their clinical roles. This also ensures that tutors on the course remain abreast of current clinical and theoretical developments in the profession as a whole that subsequently informs the quality and relevance of teaching delivered to the trainees. Staff are encouraged to keep up to date with issues related to equality, diversity and inclusion (EDI). This is to supplement the programme we have in place in relation to EDI.

Formal structures throughout the academic year to augment this CPD include:

- Termly Meetings with the core group of teaching staff. This allows a structured CPD component not only to reflect upon the teaching experience and programming issues, but to consider the specific learning needs of teaching staff in relation to the seminars on offer. This includes a reading-based seminar or presentation.
- Termly service supervisors meetings focus on the role of the service supervisor and the different challenges inherent in the role. A dedicated CPD slot, facilitated by an experienced external senior CAPT, devotes time to the task of supervision. We also

provide training and an induction process for new Service Supervisors to orientate them to their new role. We have created an induction pack which is issued to all service supervisors.

- Monthly meetings with Robert Gordon University staff to reflect upon programming and any issues arising from the teaching.
- The Course Leads receive joint supervision with a psychoanalyst/organisational consultant once every two months.
- An Intensive Study Event takes place on a termly basis where senior CAPTs from Scotland or further afield present on a range of topics that have included parent-infant psychotherapy, complex trauma and working with potentially harmful parent-child interaction. The presentations are linked to the Competence Framework and the academic programme, and are open to all tutors and service supervisors, who are encouraged to attend. Service supervisors are also invited to the closed supervision group that takes place in the morning of the Intensive Study Event where trainees have the opportunity to present their clinical work for supervision with the visiting CAPT.
- Staff have been invited to present papers at a number of conferences and events. One member of staff has progressed their study looking at the decision-making process around intensive case work. Another member of staff is pioneering a weekly meeting to equip the psychotherapy team with the skills to produce a collaborative care plan and formulation with patients.
- Staff have been involved in reviewing papers for professional peer-reviewed journals. In addition, members of staff have published papers in the Journal of Child Psychotherapy and the International Journal of Infant Observation and its Applications.
- Two members of staff are actively involved in the organisation of the ACP.

4. Developments in the Curriculum

At HDS we pride ourselves on delivering a teaching programme that prepares Trainees for contemporary practice within the NHS and third sector agencies. We regularly update the programme to reflect developments in CAMHS and incorporate policy updates from the Scottish Government, for example thinking about trauma specialist practice and working within trauma informed organisations, incorporating the GIRFEC principles in our work, and thinking about the language we use with children, young people and families. This includes attention to EDI both within the programme and within Trainee placements.

The programme has two modules each year; a clinical and research module. 'Module descriptors' were created for the clinical and the research components of the new programme. The Handbook has been updated to reflect the minor changes and adjustments that have been

made, following feedback from the Trainees. The Course Leads reflected on the timing of the delivery of modules and made a change to when seminars on assessment are delivered (now in 2nd year rather than 1st year). The Learning outcomes within the modules are linked to the Competence Framework that is the central foundation to the curriculum and programme planning.

Within these two modules, there are four seminars that run throughout the academic year: clinical; theory; research; and workshops that focus on particular topics. This year, the workshops included new to camhs; input on parent work; working with care experienced and adopted children; working with difference and diversity. Teaching on Leadership, and Equality, Diversity and Inclusion are integrated into the programme throughout the four years, so that Trainees, on qualifying, are ready to take on Leadership roles and have integrated EDI into their daily practice.

The Course Leads are a key link between the teaching and the practical components of the Training with the aim of ensuring that there is good communication and effective working relationships between those who support the trainee. The staff team meetings, Service Supervisor meetings, and links with intensive case supervisors aim to support trainees through this demanding training. As a staff group, we are reviewing what works well and what might be reviewed in terms of the curriculum and how areas are taught. The regular reviews with Robert Gordon University also provide a forum to learn from the experience of delivering the training.

A new External Examiner was appointed and has given positive feedback about the course overall. Comment was made by them that the quality of teaching and standard of supervision is very high and that our course compares favourably with other similar courses in the UK.

5. Student Intake and Placements

Four of the Trainees are placed in a service where there is a qualified CAPT which ensures that there is a close working relationship with a Service Supervisor who is on site. One Trainee does not have a Service Supervisor on site; however, in collaboration with NES we are piloting a new approach where the Trainee has access to the full support, supervision and child psychotherapy governance structure in a neighbouring health board. This provides support to the Trainee and their health board. This is a model that is proving successful and we are monitoring this as a possible blueprint for future clinical placements to support lone practitioners. In addition to clinical supervision, the Trainee attends weekly meetings looking at technical issues and developing a model for Care Planning and Formulation.

For a small percentage of the trainees, the location of analysis, work and training school involves a significant amount of travel. This can be challenging and we are mindful of the extra pressures of time that can arise in relation to this issue for some of the trainees. A number of the Trainees are having a blended experience of analysis, with some sessions in person and some face-to-face.

The current group is a majority white British group with one Trainee from a minority ethnic group. The group consists of one man and four women.

Five trainees are now in their 2nd year. The next intake will be in 2025. There are ongoing discussions with NES in relation to increasing Trainee posts, this being a wider aim in relation to workforce planning issues on a national basis. This is in line with the national direction of increasing clinical placements.

Further to a suggestion from our academic partner, there is an additional requirement for applicants to submit a 2000 word essay (a critical analysis of two papers). The selection process now includes both an individual and group interview. Both of these actions proved to be a useful and helpful addition to the selection procedure.

6. Student Progression

All five Trainees from the 2017-2021 cohort have qualified and are full members of the ACP. Two of these five are progressing to Doctoral level. One student is about to submit the Doctoral thesis for examination while a second student has progressed her project and is beginning to gather data.

7. Qualifications since Last Report

As above.

Qualifications from this cohort are not expected until 2025.

8. Post-Qualification Employment

All five Trainees from the 2017-2021 cohort have now qualified. All are employed in an NHS CAMH service and two are also in private practice. A returning Trainee also qualified and is in employment in the third sector.

9. Academic Completions

As above

10. Issues for the Training School and Host Organisation (where appropriate)

Delivery of the course is currently blended, with face-to-face teaching once a fortnight. The wider and more regular use of on-line platforms has made it more possible for us to use tutors from further afield e.g. Aberdeen/London, thus making it easier to ensure Trainees experience teaching by tutors from a range of theoretical backgrounds.

We have a number of qualified and experienced clinicians to draw on to support the Training. The small staff group we have created around us is committed and supportive to seeing the

trainees through to qualification and to the on-going presence of child psychotherapy training in Scotland. We greatly appreciate links with our colleagues on a national basis who contribute to the Scottish training with presentations at Intensive Study Events and provision of Intensive Case Supervision.

We are constantly aware of the anxiety around the position in relation to ongoing funding for the Training. This has a significant impact on HDS the organisation. While we were successful this time round in securing funding for a new cohort, we are aware that this process will have to be repeated in three years' time. We are also aware of an increase in training placements (100% increase over five years) in alignment with the Long Term Plan in England. We would hope that similar developments occur in Scotland.

In addition, we are faced with the wider situation in Scotland, where child psychotherapy provision is inconsistent. For example, there is no provision in the East of Scotland, Borders, or the North, but it thrives in Glasgow, Lanarkshire and Fife (largely due to the efforts of individual Professional Leads in those areas). We now have one Trainee placed in Argyll and Bute/Highland, which is encouraging; however, there is no qualified CAPT there and this trainee is being supported by the Glasgow CAPT service. The regional branch of the ACP, Course Leads, HDS, along with senior clinicians within the profession, have convened a working group to consider workforce planning issues. As such, a report has been produced laying out the strategic goals for the next five years. This working group is actively working to recruit people of diverse backgrounds and to find ways of including previously marginalised groups.

We continue to have on-going concerns about the small number of training analysts in Scotland. Currently, there are only analysts available in Edinburgh and Glasgow, which makes it difficult to place a Trainee in another area e.g. Borders, Highlands or Perthshire. This issue may be addressed if virtual therapy could be offered.

11. Quality Monitoring (Including Any Complaints and with Reference to University/SHA processes)

The quality of the academic component of the Training is monitored by Robert Gordon University. There are no outstanding complaints currently under investigation (and there have been none since the start of this programme in 2017).

Within the programme, we have developed a rigorous structure of feedback mechanisms that are integral to the training, for both staff and trainees. We provide an open forum for trainees to reflect and feedback on their experiences of the academic year. This is organised in a way that allows anonymity for trainees to report back on particular seminars. The process of feedback ensures that their experience is shared, and that trainees may positively influence their training. Trainees are asked to report explicitly on issues of concern in relation to diversity. A trainee gives direct feedback from the cohort to the Training Committee. Feedback is studied and considered by the Course Leads so that necessary quality improvements can be put in place.

Robert Gordon University request that the trainees submit a Student Evaluation Questionnaire, and the Course Leads submit annual reports to the University and Human Development Scotland.

Within the feedback structure, Personal Tutors, Service Supervisors, Intensive Case Supervisors and visiting tutors submit written feedback reports to highlight competence and inform areas for further development of the trainees, whilst also reflecting upon the process of teaching. Paired teaching and CPD within the staff group allows for on-going reflection and development, an area that is continually under review by the Course Leads.

12. Response to Conditions/Recommendations of the last ACP Accreditation Visit. (Including Action Plans and progress made since Last Report)

See action plan below.

ACTION PLAN RE CONDITIONS/RECOMMENDATIONS OF LAST ACP ACCREDITATION VISIT.

RECOMMENDATION (there were no conditions at the re-accreditation of 2019) (as detailed in most recent Re-accreditation Report)	ACTION NEEDED	PROGRESS TO DATE	TIMESCALE FOR COMPLETION
1. The training school keeps the ACP informed about progress in the appointment of a new CEO via their Annual Report to the ACP.		New Director appointed. Included in the annual report.	Completed
2. The ACP supports HDS to engage with the Scottish Government in the current systematic review of infant, child and adolescent mental health services which promotes the role of CAPT's	Input from ACP. Discussions with NES and Scottish Government ministers. Identify individuals from within HDS to be involved in this work.	On-going discussion with the ACP, and representatives from HDS with the focus on how to promote Child Psychotherapy in Scotland with a focus on equity of access. Further to the initiative of the Course Leads, a strategy document has been produced by the Regional Chair of the ACP, the Chair of HDS, and senior clinicians of the profession to be shared with relevant people who hopefully will agree to the need for child psychotherapy provision more widely and equitably throughout Scotland. This report has been produced and circulated (May 2022) to drive forward the promotion of Child Psychotherapy. This has resulted in a tender from NES to develop and promote Child Psychotherapy more equitably throughout Scotland.	Engagement has begun but this is necessarily an ongoing process
3. That HDS continues to build on its relationship with NES and press to resolve the fragile situation in relation to the financial provision of the MSc in Psychoanalytic Observation and Reflective Practice	As above in relation to building relationships with NES and Scottish Govt.	Negotiations have taken place between NES, HDS and the Course Lead of the MSc Observational Course. We were successful in securing 10 funded places for participants on the MSc Course (unfortunately this was a one-off agreement). This was approved in January 2020 and 10 trainees are funded on the MSc course. There is ongoing discussion with NES about further funding.	Complete

RECOMMENDATION (there were no conditions at the re-accreditation of 2019) (as detailed in most recent Re-accreditation Report)	ACTION NEEDED	PROGRESS TO DATE	TIMESCALE FOR COMPLETION
4. HDS develops a strategic approach to planning the future teaching workforce and a formal structure for identifying training and development needs for new teachers	Create a strategic plan for the development needs of teaching staff, and for growing the current teaching workforce.	This is being discussed at Board level and within the Training Committee. A strategy is proposed, to draw up a clear outline of how to bring in graduates to deliver teaching. We have been successful in recruiting new teaching staff. We are in discussion with the Board about using remote teaching to broaden our pool of available teaching staff. We had positive feedback from trainees about on-line teaching and we continue to take a blended approach to this.	complete
5. HDS teaching team and service supervisors be encouraged to take advantage of the opportunities for developing their doctorate level supervisory skills	Raise awareness of opportunities available.	Course available at RGU in relation to research supervision. There are potentially two newly qualified CAPTs (from Scotland) who we can encourage to develop doctorate level supervisory skills. They are from the first cohort of a newly designed doctoral programme which is why we have such a small pool from which to draw. We have already made links with other training schools to draw on their experience and expertise.	complete
6. HDS and RGU set out the improvements/amendments they intend to make in response to student feedback to the research component of the course in all relevant course documents.		A document has been created that outlines the process in detail of the research component. Details are in the Handbook. We delivered 2 days of induction to the research component in the month before the course begins. Feedback from the previous cohort has informed the research teaching programme and delivery. We continue to gather student feedback throughout the academic year that is taken into account on an annual basis.	complete
7. HDS sets out in all relevant course information documents the improvements	Create a document that clearly outlines the process of recruitment and selection.	In collaboration with RGU we have updated the recruitment and selection process. This has been ratified by the University and NES.	Complete

RECOMMENDATION (there were no conditions at the re-accreditation of 2019) (as detailed in most recent Re-accreditation Report)	ACTION NEEDED	PROGRESS TO DATE	TIMESCALE FOR COMPLETION
it intends to make to the recruitment and selection process prior to recruitment of the new cohort starting in 2021			
8. HDS develops a structure for training and supervising new service supervisors.	Clear structure to be created.	A programme of induction and structure for ongoing supervision of new service supervisors has been created. This is to supplement the already existing mandatory CPD and termly meetings already in place for all with the service supervisors throughout the duration of the Training.	Complete
9. A formal process for accrediting and reaccrediting training placements is adopted prior to recruitment of the next cohort of trainees.	Create a clear outline for this process	A formal process of accrediting training placements is already in place and is reviewed at the point of each new cohort.	Complete
10. HDS makes links with other training schools and external agencies in order to access specialist training and consultancy in equality and diversity to inform both curriculum and internal policy developments at HDS.	Liaise with other training schools on this subject. Identify any training opportunities by external providers.	HDS have organised and delivered CPD events on equality and diversity. The Course Leads have made links with Course Leads from the Northern School and IPCAPA. Consultation with two senior clinicians in the profession. One of the Course Leads has joined a reading group on difference and diversity. We plan to liaise with an experienced colleague in London, looking at equality and diversity across the training schools. We are making full use of resources from the ACP This is an ongoing aspect of the delivery of the training.	Ongoing

RECOMMENDATION (there were no conditions at the re-accreditation of 2019) (as detailed in most recent Re-accreditation Report)	ACTION NEEDED	PROGRESS TO DATE	TIMESCALE FOR COMPLETION
11. HDS should seek ways of ensuring that all trainees are treated equally in relation to how the fourth weekly analysis session is funded.	Updating all literature	All trainees have been informed of possible sources of funding for the 4 th session. The Handbook has been updated accordingly. The Course Leads attend the ACP Analysts Sub- Committee that attends to issues of equity in relation to analysis.	complete
12. HDS works with the ACP to find a solution to the shortage of analyst issues in Scotland, which may have to include different models of personal analysis	Discuss with ACP	This continues to be raised within the ACP Scottish regional meetings and the ACP Analysts Sub-Committee meetings. Further to a working party involving regional and national members of the ACP, Course Leads, HDS and senior members of the profession, a document has been created to consider issues around training pathways and workforce planning. The issue of availability of analysts is being addressed within this process.	ongoing
13. HDS addresses the inconsistencies in the number of analyst sessions undertaken by trainees.	Update the handbook and information about analytic sessions	NES contribute to 3 paid analytic sessions for the duration of the Training. All trainees are encouraged to take on a 4 th session. Support and encouragement is given to find funding for this either from their NHS Board or from a bursary.	Complete
14. Information on the analyst self-funding requirements are made explicit to prospective trainees in pre course information and HDS 'open days'	Update all pre-course information and the open day presentations	HDS agrees with the recommendation of the ACP for a fourth session of analysis. Links are available for possible sources of financial support as this session requires self funding. Course Leads are currently working on ensuring that pre-course information is included in written course information and open days.	Ongoing