

annual report of the Independent Training to the training council of the ACP academic year 2021- 2022

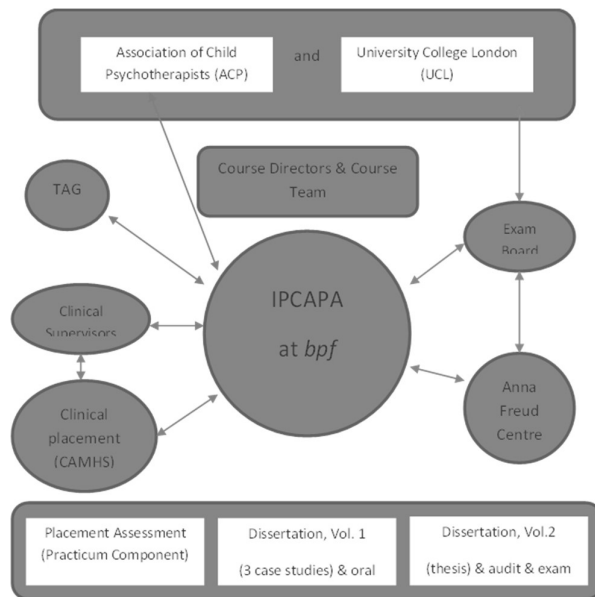
1. summary of management structure, staffing and resources (including changes since last annual report)

The Independent clinical doctorate training in child and adolescent psychotherapy, a UCL doctorate run in collaboration between IPCAPA at the *bpf* and the Anna Freud Centre, is funded through a contract with Health Education England, monitored by Health Education England London and South East.

For the past 9 years we have worked together to develop and deliver an integrated clinical and academic training, with the aim of qualifying child psychotherapist clinical researchers who are ready to work in the modern NHS.

The British Psychotherapy Foundation is the lead organisation for the clinical component of the training and liaises within the *bpf*, with the ACP, HEE, NHS services and other external stakeholders. AFC leads on the research component and is the lead organisation for coordinating with UCL. The clinical and research components have different management and organisation structures within each organisation. The clinical and academic course directors work closely together to achieve a coherence in the training offer to trainees. The training is often referred to as the IPCAPA training. This acronym only applies to the clinical training, as IPCAPA is 1 of the associations within the *bpf*. For the last year or 2 we have been mindful of the need to refer to the Independent Training in all outward facing communications but have continued to use IPCAPA as a form of shorthand and when referring only to the clinical elements of the training. As we move forward, we call it the Independent Training, so that the name captures both the clinical and research components of the course and reflects the fact that the course is an integrated programme.

The diagram below illustrates the relationship between the different organisations involved with the training. There have been some changes to the management structure and organization of the *bpf* since the last annual report.



In May 2022, the *bpf* CEO left post. A new team is now in place; a new CEO and Director of Corporate Services for the *bpf* were appointed in May 2022. This is a welcome and positive development for the organisation and in particular the child training. In 2019 the *bpf* completed a Memorandum of Understanding (MoU) with UCL, setting out the relationship between the two organisations and their respective roles with regard to the clinical doctorate training. We continue to keep this under review. The management structure of the training within UCL continues to be part of the Education and Training Division at the Anna Freud Centre. The course sits within the Research Department of Clinical, Educational and Health Psychology, where the Psychoanalysis Unit is also based, as well as a range of post-graduate programmes, including the pre-clinical MSc in Early Child Development and Clinical Applications, and the MSc in Developmental Psychology and Clinical Practice.

At the beginning of 2021-22, as in previous years, the training was managed jointly by the Clinical Course Director at the *bpf*, and the Academic Course Director, based at UCL and the Anna Freud Centre, alongside the Business Manager. A new Business Manager started in April 2022 but is relocating in April 2023 so will leave the *bpf*. We have adjusted some of the staff roles in the team and have appointed a manager in a part time role to ensure the smooth running of the programme.

In addition to the usual work of running a training programme, recruiting and selecting the new intake of trainees for 2022, Health Education England (HEE) invited all ACP registered child and adolescent psychotherapy training to tender for 3-5 years funding of the training from 2023. The tender was submitted in March 2022. This is the first time the training school has had to tender. We are grateful for all the help and support of colleagues who worked with us over this period. HEE informed us in August 2022 that our tender was successful and we are now in discussion about the implementation of the tender.

In the meantime, building on the work of former staff, the current Independent training team has focused on responding to HEE's request that we develop the training in line with the NHS LTP and increase our yearly intake of trainees. Maintaining the quality of the training experience for trainees, sustainability and strengthening the infrastructure of the of the programme have been key drivers for 2021/22. In brief this work has included:

- Appointment of an EDI lead and use of the HEE EDI bursary to support pre-clinical candidates and widen accessibility to the training.

- Appointment of curriculum lead to review curriculum in the context of HEE LTP and needs of the modern NHS.
- Appointment of a deputy director (Research) at the AFC to help develop increased capacity for higher student numbers.
- Safely facilitating the whole training group to return to face-to-face teaching for the clinical component of their training from September 2021, while continuing with online/remote teaching for the majority of the research teaching based at the Anna Freud Centre.
- Review of staff pay and issuing of formal contracts.
- Review of needs of training as it is undergoing change and expansion. This included discussion with the *bpf* Board about the specific needs of the training and current demands.
- Successful recruitment of 4 new Senior Tutors to join the team in September 2022. They each focus on a core element of the training: equality, diversity and inclusion, curriculum, placement provision, selection and pre-clinical training routes.
- As our year group numbers are increasing we have changed the staff structure around incoming year groups to ensure we offer sufficient support.
- The independent training is the only child and adolescent psychotherapy training to offer a Jungian stream. We have more trainees interested in joining this stream and so have increased and formalised our links with our Jungian adult colleagues at the *bpf*.
- In 2022 we had the highest number of applications to the training and this year have 20 trainees in Year 1. We filled 16 out of the 17 HEE commissions offered this year.

2. Staffing

The doctorate is delivered by a Course Team, which includes staff working on the clinical side of the course based at the *bpf*, and staff working on the academic elements of the course based at AFC and UCL. All members of the Course Team work closely together to deliver the integrated training, and are employed by UCL, AFC or *bpf*. Those not employed directly by UCL are affiliated to UCL through formal honorary contracts. Key members of the course team include:

- Academic Course Director (AFC) – joint director of the programme, and jointly responsible for the running of all aspects of the course, together with the Clinical Course Director. This position will be nominated by the Head of PGS and approved by the AFC.
- Clinical Course Director, (*bpf*) – joint director of the programme, and jointly responsible for the running of all aspects of the course, together with the Academic Course Director. This position will be nominated by the *bpf* and approved by the Head of PGS.
- Deputy Academic Course Director (AFC)
- Senior Education Manager (AFC)
- Programme Manager (*bpf*)
- Programme Coordinator (*bpf*)
- Programme Administrator (AFC)

In addition to the Course Team, the following roles are employed by the AFC:

- Research Supervisors (x5)
- Sessional Teaching Staff

In addition to the Course Team, the following roles are employed by the *bpf*:

- Four Senior Tutors
- Year Tutors
- Progress Advisors
- Sessional Teaching Staff
- Curriculum lead (contract ends April 2023)
- Pre-clinical coordinator (approx. 3 hours a week).

Roles and Responsibilities

- The joint Course Directors hold shared overall responsibility for the organisation, management and delivery of all aspects of the course. This includes oversight of admissions, curriculum and teaching, clinical placements and assessment. They share responsibility for course development, the overall academic quality of the programme, and compliance with UCL doctorate and general regulations.
- The Academic Course Director is responsible for the strategic and day-to-day organisation and management of the course, particularly relating to the academic/research component of the course. This includes the allocation and supervision of research projects, and the planning and monitoring of all academic teaching and assessment. The postholder has overall responsibility for ensuring that all UCL academic requirements are met.
- The Clinical Course Director is responsible for strategic and day-to-day organisation and management of the course, particularly relating to the clinical component of the course. Management responsibilities include ensuring good liaison with various pre-clinical training routes, selection and clinical teaching and training.
- The Deputy Academic Course Director supports the Academic Course Director with running the academic/ research component of the course.
- The Senior Education Manager, AFC, ensures that the course fully complies with all UCL requirements.
- The Programme Manager, *bpf*, is responsible for the business management of the clinical training, managing HEE contracts and securing and quality assuring clinical placements. The postholder must ensure trainees meet standards as set out by the ACP and Health Education England. The Programme Manager will coordinate the review processes for trainees, in co-ordination with the Senior Tutors and Progress Advisors.
- The Programme Coordinators work together to support the team and trainees with administration and help ensure smooth running of the training across the two organisations.
- The Senior Tutors, *bpf*, are a recent development in the training with the plan that for part of their role they become year tutors for one year group each and will be responsible for tracking trainee progress within that group. This includes meeting with trainees and Progress Advisors on a monthly basis. They are also responsible for developing pre-clinical training links, equality and diversity strategy, placement provision and curriculum.
- Alongside this we have also Year Tutors for Years 2, 3 & 4. They will remain under their existing contracts until their year group graduates.
- Progress Advisors are the trainees' individual personal tutors throughout the training. The tasks of this role & duties are clearly set out and they report to the year tutor for their trainee(s). The system has been adapted for the incoming Year 1's so we have fewer Progress Advisors employed for more hours, and each one will work with 3-5 trainees. This smaller group of Progress Advisors meet with the Year Tutor on a monthly basis. We have increased the number

of formal trainee reviews; we will now have an initial, mid-year and final year review. The Clinical Director attends end-of-year reviews, and where possible there will also be representation from the Research Supervisor at the AFC.

- The Research Supervisors are responsible for trainees' research learning and support them with their research thesis.
- Sessional Teaching Staff are employed as contractors by both the AFC and *bpf*, bringing subject matter and teaching expertise to deliver high-quality clinical and research training.
- A Training Advisory Group (TAG) of the *bpf* meets monthly and has responsibility for monitoring the clinical elements of the course and reviewing the trainees' professional development and learning in accordance with the training regulations of the professional association.
- The IPCAPA Executive Committee meets on a termly basis to discuss the delivery and financial planning of the Clinical side to the programme, and how this relates to the wider strategy of the *bpf*. It also has a responsibility for thinking about IPCAPA graduates, their needs, and what the *bpf* can offer them.

All clinical staff posts employed by *bpf* are widely advertised to encourage a range of applicants. They are qualified, experienced CAPTs and have contributed towards the profession. As the trainee numbers, and consequently placements, have increased significantly over the past few years we have strengthened the infrastructure of the clinical team.

Our sessional teaching staff are highly experienced deliver teaching related to their particular area of expertise. They are issued with *bpf* contracts for their teaching module. They are frontrunners with wide-ranging expertise, providing teaching on theoretical modules, including expertise from years of practical delivery. We have capacity within our clinical team to continue to deliver a high-quality course and aim to create more substantive teaching posts to support future course development.

A similar AFC/UCL Human Resources employment process is followed for all staff they employ.

3. CPD for staff (in relation to teaching & tutoring)

Our UCL partnership gives our students and teachers access to their extensive library, a range of psychological support resources, training, and the UCL Learning Centre, offering bespoke support and provision to trainees to enhance their learning and support any additional learning needs or disabilities. All trainees have UCL emails and access to Moodle, giving access to the latest resources, links to the CAPT doctoral training and to the wider educational institution. The ACP accreditation and annual UCL exam board reviews have confirmed these resources are high-quality and are being used by the trainees.

All staff (core and sessional) are invited to attend both our Winter and Spring conferences as part of their CPD. Through UCL, our university partner, staff have opportunities to access their courses for teaching staff, including a range of online and face-to-face courses and trainings. A number of *bpf* staff have been invited to take a more active role in the annual AFC Colloquium, and others have been encouraged to attend it.

A supervision structure has been developed where performance and training needs are reviewed. Additionally, IPCAPA continued to offer a course for Service Supervisors and a number of our core staff team have taken part in 1 of these. Staff have continued to be active in writing, with many papers, conference presentations, talks and publications. Some graduates of the Independent Training presented at the ACP Annual Conference, and a number of journal articles based on our trainees' dissertations have been published or are in the process of being prepared for publication. Staff,

graduates and trainees have also played an active role in a number of ACP committees and taken part in various working groups, including both leading and participating in the online for support for supervisors organized by the ACP in the light of additional online learning.

There are many opportunities for continuing professional development available as part of the ongoing IPCAPA members' programmes, more generally as part of their wider membership of the *bpf*, which has regular Scientific meetings, work in progress forums, as well as one-off presentations.

There are formal links with Intensive Case Supervisors (ICS) who are invited to an annual meeting with trainees and Service Supervisors. We also welcome informal links and encourage liaison between them, Progress Advisors, Year Tutors and the Clinical Director.

4. Developments in curriculum

We have long-standing experience in delivering this course and reviewing its practical and academic components, and, over several years, we have consistently delivered a curriculum that exceeds commissioner requirements. Our training day is a Tuesday and the clinical (IPCAPA) and academic staff (AFC/UCL) work together to ensure a coherence of the timetable and curriculum across the four years. At the beginning of the academic year 2022 – 23 academic year we moved back to a more traditional method of teaching in-person, although there are some seminars, particularly research, where online teaching is more appropriate.

We deliver and review our teaching offer with trainees, teaching staff and NHS Service Supervisors, guaranteeing that we reflect and adapt our programme, and best equip our trainees to work in the modern NHS. Based on a range of feedback over the years we have adapted and changed the timetable and assignment submission dates, so the workload is achievable for trainees with the 4-year timeframe.

The course and curriculum, delivered through our collaborative partnership, is a complex mix of supervised clinical practice in an NHS CAMHS setting and weekly attendance at a wide range of seminars for the taught elements of the programme. We have created opportunities for joint teaching: the Year Tutors for years 3 & 4 join some of the research seminars to support the trainees to integrate research and psychoanalytic thinking and consider applicability in the clinical setting.

The research element of the training is taught at the AFC or online and the clinical element is taught at the *bpf*. Some core staff members teach across both the research and clinical programmes, with additional staff members being brought in to deliver further seminars and specialist topics. In 2022 a change was made to the requirements of the research dissertation portfolio, to increase the focus on science communication skills, and to reduce the overall amount of written work on the course. This is in line with UCL policy to try and diversify types of assessment and reduce the emphasis on purely essay/written assessments. The impact of this on completion rates for the doctorate will be seen from 2024, but we hope it will enable the majority of trainees to complete all ACP and UCL requirements for the training within 4-5 years.

In the clinical programme, we aim to capture key issues in developing child psychotherapy practice in CAMHS and related service settings, ensuring that upon qualification trainees are equipped to work autonomously in these settings as well as to provide supervision and consultation to other professionals and to lead on service developments. The content for the clinical programme integrates feedback from our Service Supervisors on crucial learning areas needed and emerging within CAMHS; ACP identified core competencies for child psychotherapists; trainees' views on their learning needs and interests; evidence-based practice within CAMHS and psychoanalytic practice; the NHS long term plan; and the time-honoured programme of theory that marks us out as an Independent Training.

We include opportunities in the clinical teaching for all four year groups to come together for workshops about child psychotherapy in the NHS and other relevant settings. In addition to a rotating programme of specific workshops, conferences and teaching events, weekly core seminars provide trainees with multiple learning opportunities to develop their clinical thinking and practice and

to link this to theory, research and evidence-based practice, bridging the research-practice gap. For qualification, the clinical component and practice are assessed by clinical reports, the clinical paper, and by supervisors' recommendations on required clinical work as detailed in the Trainee Log.

The approach to learning is through theoretical teaching, clinical seminars, application workshops, practice groups, research seminars, clinical paper presentations, academic, research and clinical supervision. The learning is supported by personal psychoanalysis.

In addition to the practice groups, theory seminars and clinical seminars for each year group we continue to enjoy the case discussion forum once a term. This is an opportunity for a trainee to present a case to very experienced child psychotherapists and the whole student cohort, giving those who present a case both an opportunity to practice presentation skills and to gain further understanding on their case through this 'master class'. There were also workshops, held twice in the academic year, on Race and Diversity, which explored current dilemmas in race, gender, sexuality and disability.

We continued to offer the Winter, Spring and Summer Workshops, based at the Anna Freud Centre, to support trainees working on their research dissertations and continued with the recent and much appreciated summer workshop to enable trainees to achieve the relevant tasks (or at least be clearly signposted towards them) before the summer break.

We continued with our programme of advanced practice seminars for fourth year trainees, to help them develop specific competency as senior trainees. These covered providing consultations to other agencies, supervising others, writing for publication, and awareness of the range of roles child psychotherapists need to take up in the current NHS. We give the fourth-year trainees an opportunity to develop their leadership and facilitation skills, by taking on a lead role in the final term of their participation in practice seminars.

In December 2021, we held a Winter one-day conference, 'The Alliance in Work with Adolescents and Young Adults'. This conference aimed to expand and deepen our thinking and practice in developing and maintaining the alliance in work with adolescents and how we attempt to resolve alliance ruptures. The conference will end with presentations from recent graduates on their research in alliance ruptures with adolescents in STPP treatment, and the impact on practice.

In March 2022, we held our Spring ½ day conference, 'Working with parents in child psychotherapy'. This conference focused on the importance of working therapeutically with parents to enhance reflective parenting, outlining the challenges, and the clinical and empirical evidence for parent therapeutic work. Case vignettes were used to illustrate parental difficulties in reflective functioning through the daily encounters brought by the parents to psychotherapy sessions. Small group discussions gave participants an opportunity to reflect on the material and consider some of the following; parental reflective functioning levels, case formulation in light of mentalization theory, joining the parents and identifying 'ports of entry', and possible interventions to enhance parental reflective functioning.

The curriculum is continually revised in the light of trainee feedback, with alterations being made to both content and timing. We have adapted our method of collecting feedback from trainees with the aim of this becoming more regular and easier for them to provide us with their thoughts on their training experience.

5. Student intake and placements (including issues of access and diversity)

We had our highest number of applicants for the training in 2021. Following the increase of HEE commissions again this year, a group of 20 entered the training in Autumn 2022. These 20 new trainees have come from a variety of preclinical courses, with a number from M7 or M7 satellite courses, but also from Anna Freud Early Child Development and Clinical Applications MSc and the *Bpf* Birkbeck

Masters in Human Development. There were five trainees from a BAME background. The placements are as follows:

1 in Bristol
1 in Huntingdon (Cambridgeshire and Peterborough NHS Foundation)
1 in Luton (East London NHS Foundation Trust)
1 in Brighton (Sussex Partnership NHS Foundation Trust)
1 in Gloucestershire (Gloucestershire CAMHS)
1 in Belfast (Belfast NHS Foundation Trust and FCA)
1 in Redhill (Surrey and Borders Partnership NHS Foundation Trust)
2 in Kent (Maidstone CAMHS, one has a joint placement in Brent)
11 in London (Newham CAMHS, AFC/UCLH, AFC/BYPC, Bexley CAMHS, Greenwich CAMHS, Lambeth CAMHS, Enfield CAMHS, Haringey CAMHS, Brent CAMHS)
5 of the trainees are on the Jungian pathway.

Issues of access to training continue to be of concern, but thanks to a generous donation we have for a few years now been able to contribute to the analytic fees of a few potential applicants prior to them being ready for training. For the third successive year, we have access to the Health Education England bursary which offers financial support to potential trainees who are doing pre-clinical studies. This bursary funding can also be used to help towards analytic fees. Successful bursary applicants receive support from a mentor who can help them prepare for an application to the training. We hope that the changes to the ACP's pre-clinical requirements will widen access to the course and will keep this under review.

We have a robust and comprehensive selection process, offering prospective trainees an individual meeting exploring their suitability to work with children in the modern NHS, a separate in-depth interview exploring their personal suitability, a group interview which gives an indication of how they would manage within a multidisciplinary setting and a further group interview with 'an Expert Panel', namely young users of a CAMHS service and an adult parent/carer of a young person who has received help. Additionally for the last 4 years we have included an academic exercise which was looking for the capacity to read a journal article in a critical way and to summarise it. This was done with a view to being ready to support those accepted on to the training who might need additional help with such academic/research tasks.

6. Student progression years 2+ (with comments/reasons re: any difficulties in placements/ analytic arrangements)

At the start of the year, Autumn 2022, there were 59 trainees enrolled –

20 in year 1,

13 in year 2,

16 in year 3,

9 in year 4 and

1 trainee on extended maternity leave and will return in October 2023.

In November 2022 1 trainee returned from maternity leave to the current year 3 group.

There were no changes to any training placements.

Trainees are in 4- or 5-times weekly analysis.

7. Qualification with the ACP since last report

During the academic year 2020-21 8 trainees qualified. Two of those trainees have already completed their viva's and have been awarded doctorates.

8. post-qualification employment

All of those graduating in 2022 found suitable employment with jobs in generic or specialist CAMH services.

9. academic completions (where appropriate)

The course is designed in such a way that the academic and clinical components are not considered as two separate courses, and the completion of the doctorate is not optional for trainees on the course. However because of the way ACP training requirements are set up, most trainees complete requirements for the ACP before submitting their dissertations. UCL automatically allows one year 'writing up' beyond the four year course, with the possibility of applying for further extensions where required. The number of students completing the doctorate within five years has been increasing year on year, with some students now completing all ACP and UCL requirements within four years. As described above, in 2022 a change was made to the requirements of the research dissertation portfolio, to increase the focus on science communication skills, and to reduce the overall amount of written work on the course. The impact of this will be seen from 2024.

To date, only two students have qualified with the ACP without submitting their dissertation and achieving the doctorate. In the course of the last year the following number of students have passed their vivas and gained the doctoral qualification

- 5 from the 2016-2020 cohort, 3 from the 2017-2021 cohort.
- Two from 2018-2022 have already completed their viva examinations and are awaiting the outcome) and the remaining 7 are currently in the process of submission and/or awaiting their vivas.

10. issues for the training school and host organisations (where appropriate)

We continue to work closely with the research team at the Anna Freud Centre and senior staff meet monthly to review the programme with the aim that we continue to offer an integrated clinical and research doctorate.

Sustainability for the *bpf* as a whole is also being developed, with the aim to bring greater collaboration between the various programmes based at the *bpf* and to introduce new courses which could support further development of all the trainings based at the *bpf*, and the facilities available to them.

While we acknowledge that we are at the point of change and the next few years will bring interesting challenges and opportunities, we have done a lot of careful planning, and listened to feedback from staff, trainees and other stakeholders. We are confident that the programme will continue to be successful and grow. The team at the *bpf*, working with our colleagues at the Anna Freud Centre (AFC) are committed and equipped to ensure smooth running of the programme and strong financial management.

We are working closely with other ACP Heads of Training, Service Supervisors and key stakeholders to consider how best to develop and grow the child psychotherapy training.

We continue to be actively engaged in the challenge of integrating what was always a demanding theoretical and clinical programme, with research teaching and practice which we believe positively contributes to the depth and integrity of the clinical training. Our aim is to enable trainees to develop robust competencies suitable for child psychotherapists working in the modern NHS, and ensuring they are able to complete the doctorate within the four years of training. We are pleased by the number of graduates who are achieving their doctorates and who leave the training with a strong sense of the value of being a clinician-researcher.

11. quality monitoring (including any complaints and with reference to university/commissioner audit processes)

The regional education commissioning teams continued to monitor the quality of commissioned programmes and the performance of education providers through the following activities: -

- Collecting / analysing quarterly contract monitoring data through the portal
- Regular contract meetings and an annual contract review and assurance meeting at the end of the year

The training has been successful in passing this scrutiny.

Health Education England (HEE) introduced a nationally standardised student data collection approach from the 2021/22 financial year. This approach will cover student and placement activity data and will help consider and inform future workforce supply planning through one system. The aim is to establish the new system from April 2020 and will involve all Higher Education Institutions.

The training is monitored annually by UCL's external examiner, who in her 2022 report commented

'This is an excellent course with a strong curriculum equipping the trainees well for their role in the Child Psychotherapy profession. It is easy to see how it will support professionals able to lead on both clinical and research quality nationally and support multi-disciplinary work for children and young people. The quality of the clinical work continues to demonstrate the enormous potential impact when working with young people and their families, most of whom have experienced extremely challenging circumstances.

One of the more positive outcomes of the pandemic has been the greater openness to work online and the move to a more blended approach seems to be to be a very positive move that can be used to support the trainees in what is a demanding curriculum.

The quality of the students work is generally very good and the feedback of the tutors and supervisors thoughtful and supportive. The integration of theory to support clinical work demonstrated in the written presentation of case work is excellent. The practicum reports show how the whole system is aware of the breadth of the work the students do and how well embedded it is in MDT work. The attention to addressing Equality, Diversity and Inclusion is evident..... The attention to considering the needs of a diverse population is evident in the marking schemes and seems increasingly integral in the curriculum and the approach to the work'.

12. action plan re conditions/recommendations of last ACP accreditation visit.

The most recent ACP accreditation occurred in October 2022. We currently awaiting the final report and know that there are no conditions. We will follow up on the recommendations once the report is available.

All recommendations from the previous ACP accreditation have been achieved.

Elizabeth Murphy, Clinical Course Director and Nick Midgley, Academic Course Director