

annual report to the training council of the ACP academic year 2016-2017

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

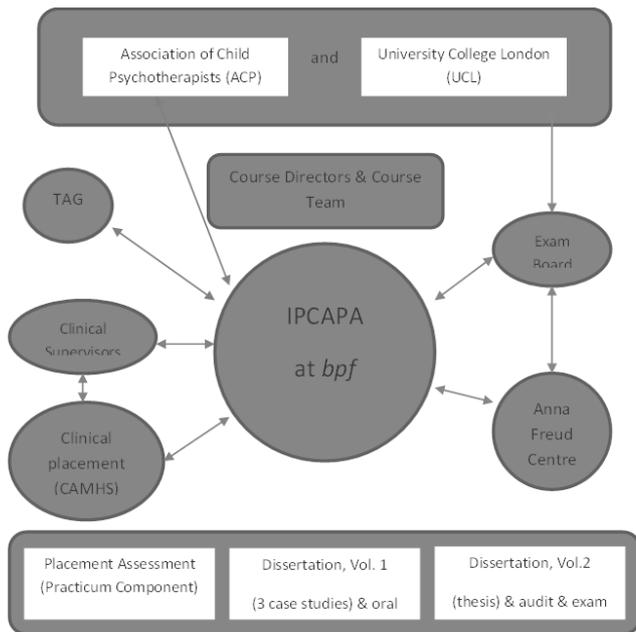
The clinical training in child and adolescent psychotherapy delivered through IPCAPA at the *bpf* is funded through a contract with Health Education England, monitored by HEENCEL.

Psychotherapy training at the *bpf* is conducted across the four psychotherapy disciplines of Psychoanalysis, Psychoanalytic Psychotherapy, Jungian Analysis and Child and Adolescent Psychotherapy which are in specific Associations. The Associations within the *bpf* each have their own training (some with more than 1 training). The postgraduate life of these associations also takes place within them, with many additional events being available to all members of the organisation.

This has been the last year in which the IPCAPA training had 2 separate university partners, each validating separate programmes. The partnership with Birkbeck College, University of London has a few remaining recently qualified graduates on its programme, but no current trainees as from September 2017. Since Autumn 2014 IPCAPA at the British Psychotherapy Foundation (*bpf*) and the Anna Freud Centre/UCL have collaborated to produce an innovative and exciting new Doctorate in Child and Adolescent Psychotherapy. Those on this 4 year full time programme are entering their final year and it is hoped that for most of them this will lead to the award of DPsych from UCL and professional membership of the Association of Child Psychotherapists (ACP) as well as the *bpf*.

During 2016-7 the IPCAPA training was managed by the Head of Training (also referred to as the Clinical Course Director, as there is an Academic Course Director, based at the Anna Freud National Centre for Children and Families, who holds responsibility for the research component of the training) and the Business Manager aided by a curriculum lead, and staff members with responsibility for the research programme with Birkbeck and pre training issues. There is also a small group of practice group leaders who deliver seminars on a weekly basis, with a larger teaching team and a Training Advisory Group which advises on the overall direction of the training and decisions about the progress and qualification of trainees. Each year group has a year group tutor who teaches and has oversight of his/her year throughout the training and each trainee has a Progress Advisor (personal tutor) who is their key point of contact with the Training Advisory Group and who keeps a close eye on the trainee's progress. There is a dedicated administrator for the course and the Business Manager is responsible for financial and contractual matters including the accreditation process for training posts. There is a team of research seminar leaders and supervisors, based at the Anna Freud National Centre for Children and Families,

In Summer 2017 the CEO resigned and Malcolm Allen, who had been Chair of the Board of Trustees since March 2015, was appointed as CEO, giving up the position of Chair of the Board which has been filled by the Vice Chair. His appointment has ensured that the new CEO was already very familiar with the aims & working of the organisation. This decision was taken by the Board of Trustees after the open recruitment was unsuccessful in appointing a new CEO in March 2017 and will be reviewed in 2 years time. Malcolm Allen has considerable experience of being a CEO & is therefore able to ensure the stability, smooth running and financial management of the clinical training provision.



2. Staffing

A new Curriculum Lead has been in post and has been very active in leading on changes to the shape of the teaching day which will take place from Autumn 2017. An administrator was in post for approximately a year, but has now left, and has been replaced by a new staff member who has very quickly grasped the requirements of the post.

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

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 an annual conference and one-off presentations. Through UCL, our university partner, staff who have honorary contracts with them (which includes the core team and year tutors and those involved with marking assignments) have opportunities to access their programmes for teaching staff. To improve practice we have had opportunities for staff to observe each other teaching, and also regularly arranged paired teaching, to support the more senior seminar leader and develop the junior one to enable her to carry out that role in the future. The development of the workshop programme has offered further opportunities for the core staff team to expand their knowledge of modern NHS practices and to be aware of the latest research in the topic under discussion.

Additionally we have created a number of ways in which the 'learning team', including service supervisors, intensive case supervisors, progress advisors and those involved in the direct delivery of seminars can come together to develop a more cohesive understanding of each perspective and focus on the trainee's learning needs. We offer termly CPD for those involved in the delivery of the training, and in the past year this has included the opportunity to think through dilemmas on cases where intensive case supervisors and service supervisors might have different perspectives, presentations of some of the trainees' audits and Monica Lanyado offering a preview of a forthcoming book, which addressed issues to do with 'the absence of 'holding' and containment, and the absence of parental protection'.

IPCAPA has also developed a course for those wishing to become intensive case supervisors of IPCAPA trainees and a course for Service Supervisors and a number of our core staff team have taken part in 1 of these. Additionally, since the IPCAPA at the *bpf*/AFC /UCL doctorate programme has been instituted, 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.

Staff have continued to be active in writing, with many papers, conference presentations, talks and publications, including contributions to the ACP annual conference. They have also played an active role in a number of ACP committees and taken part in various working groups including those on professional competencies for training and on the implementation of the STPP

4. Developments in curriculum

The curriculum of the IPCAPA professional doctoral training in Child and Adolescent Psychotherapy for years 1-3 was delivered through a collaborative partnership of teaching delivered by IPCAPA and by AFC-UCL. For those in the 4th (and 5th) year on the programme with Birkbeck, the research teaching was delivered by Birkbeck, with all the learning related to clinical skills being the responsibility of IPCAPA at the *bpf*.

This year a programme of advanced practice seminars was developed for fourth year trainees, the last cohort under the *bpf*/IPCAPA/Birkbeck programme, 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.

The development of our new doctoral programme with UCL has led to changes in the timings and demands of certain assessments, necessitating some changes in the delivery of certain theoretical seminars. So far staff and trainees have managed well and it is gratifying to see the learning objectives from certain tasks being so well achieved. Naturally staff are also learning what works well and have made adjustments through learning from experience. Our last full year group on the Birkbeck programme have qualified, although there are 3 trainees from that programme who are continuing.

During the last academic year, we have continued to deliver a teaching programme that is responsive to the changing needs of the CAMHS service while retaining a core syllabus that focuses on theory and skills in independent child and adolescent psychoanalytic psychotherapy. In preparation for the programme, we consulted with service supervisors, trainees, and our UCL doctorate partners. The afternoon workshop programme continued to be refined and to be responsive to requests from both the students and their service supervisors for specific topics to be covered. Key issues that emerged in the consultation were the need to look further at emerging ideas in Attachment, the impact of trauma, and at the different evidenced based models of short term psychotherapy with children, adolescents and their parents. These are being included in the afternoon application seminars which look at current practice in NHS. This year, the first term focused on specific issues in working with looked after children and adoption, the second on deconstructing mental health diagnosis and the third on specialist mental health assessments.

There was also a workshop on Issues in Diversity, an annual event which explores current dilemma in race, gender, sexuality, and disability. The evening theory programme was changed to include clinical and theory seminars in assessment and parent work in the second year, in preparation for the doctorate assessments in these areas.

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

The group of 9 are entering the training in Autumn 2017- 1 man and 8 women.

All came through recognised preclinical courses, 2 from the Tavistock, 4 from the Anna Freud Centre, and 3 from the *bpf*/Birkbeck MSc. 1 of them is on the Jungian pathway. 1 of our intake has alerted us to their specific learning needs, being dyslexic. Five of the intake identified as other than 'white UK'. Issues of access continue to be of concern, but thanks to a generous donation we are now in a position to contribute to the analytic fees of a few potential applicants prior to them being ready for training.

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 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.

Their trainee placements are all in different NHS Trusts, three in London (Brent CAMHS, Bexley CAMHS, Bromley CAMHS), two in Kent Surrey Sussex (Richmond CAMHS & Redhill CAMHS), 2 in East of England (Cambridge CAMHS and Luton CAMHS/AFC,) one in Bristol (South Bristol CAMHS) and one in Poole (Poole CAMHS).

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

At the start of the year, Autumn 2016, there were 33 trainees enrolled- 7 in year 1, 8 in year 2, 9 in year 3 and 8 in year 4. There was also 1 trainee from year 5 who had had her training extended, because of previous disruptions within her placement. There were 3 trainees on maternity leave: 1 from year 4 & 2 from year 3 1 of whom returned to training in the course of the year.

Unfortunately 1 trainee experienced a breakdown within her placement and it was agreed that that she would move NHS trust to complete her training.

Trainees are in 4 or 5 times weekly analysis. 1 of the training analysts was unfortunately off sick for part of the year but alternative temporary arrangements were made with the support of the Chair of IPCAPA's Training Analyst's Committee and the Chair of the ACP's Student Analysts and Therapists subcommittee. 1 trainee changed analyst in the course of the year, a process managed by the Chair of IPCAPA's Training Analyst's Committee.

7. Qualifications since last report

During the academic year 2016-7 8 trainees qualified: There was 1 qualification from the 2011 intake-a trainee who had been on a .8 contract, and 2 from the 2012 intake, 1 of whom had had an extension because of having to change placement because of service transformation. A further 5 from the 2013 intake qualified in July 2017.

8. post-qualification employment

All of our graduates (except 1 who will be on maternity leave from September 2017) found suitable 1st destination employment with jobs in generic or specialist CAMH services.

9. academic completions (where appropriate)

2 graduates have been awarded their doctorate from Birkbeck College, University of London.

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

This year was the 3rd year of our new doctorate programme with Anna Freud Centre/University College London. So far this innovative new programme, designed to ensure that trainees achieve their doctoral qualification within the 4 years of the training, is going well and all of the 2016-7 1st years successfully completed a critical reading exam and carried out a clinical audit, as well as settling in to their clinical placements, beginning work as child psychotherapists and getting to grips with all sorts of technical and theoretical issues. The year 2s produced a number of audits which were gratefully received by their employing trusts and in some services have already been used in ways which have proved to be of value to the service. They have also worked hard on various literature reviews related to the empirical studies which they will be carrying out in year 3. Those who have completed the 3rd year of the programme have been engaged in their empirical research, which at times has been challenging both in itself and in terms of balancing the many competing demands on their time. We have not yet seen a cohort complete the programme and are aware of the work that needs to be done to develop the new doctorate. We will need to resolve the challenge of integrating what was always a demanding theoretical and clinical programme, with research teaching and practice in a way that ensures that the depth and integrity of the clinical training is maintained, at the same time as enabling trainees to develop a robust competencies as researcher-clinicians, and ensuring they are able to complete the doctorate within the four years of training. However we are pleased to report that so far all are progressing well.

We continue to have 2 separate doctoral partners. Two graduates achieved their doctorates from our doctoral programme with Birkbeck, and three more other recent graduates are moving steadily towards completion.

As the other training schools will also have experienced, this has again been a year where we have had to look outwards and inwards simultaneously. There has been considerable work that has had to take place to try to keep abreast of government plans about the future funding of child and adolescent psychotherapy training, and IPCAPA has been actively involved in those discussions. Additionally, as stated above, there have been a number of transformations in Trusts where IPCAPA trainees have placements, often involving change of premises, and occasionally of senior staff, and we have been active in trying to ensure that our trainees are supported as well as possible to manage these.

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

The training achieved a 100% green rating in its QCPM report for 2015-6 (the latest report).

In the process of dealing with the placement breakdown referred to in section 6, a number of specific issues about our systems and procedures were highlighted. These have been thoroughly investigated and changes made where necessary which has resulted in further clarification of IPCAPA operating procedures and protocols, such as no longer using trainees' names, but referring to them by number, in minutes of meetings, and clarifying where responsibility for decision making lies.

The training also was involved in an ACP re-accreditation visit in March 2017. While this was very time-consuming for all involved, we learned much from the experience and are delighted that the accreditation panel reported 'the panel are impressed by its high standards of teaching, the pastoral care provided to the trainees as well as the commitment of clinical and academic course directors and the business manager who have successfully led, developed and implemented a new 4-year Clinical Doctorate programme in collaboration with the Anna Freud Centre for Children and Families and the University College London'. Specific recommendations are detailed below.

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

CONDITION <i>(as detailed in most recent Re-accreditation Report)</i>	ACTION NEEDED	PROGRESS TO DATE	TIMESCALE FOR COMPLETION
There were no conditions			

RECOMMENDATIONS <i>(as detailed in most recent Re-accreditation Report)</i>	ACTION NEEDED	PROGRESS TO DATE	TIMESCALE FOR COMPLETION
That IPCAPA reports on the impact of organisational change, stemming from the recruitment of a new CEO at the <i>bpf</i> on the stability, smooth running and financial management of the clinical training provision in its next Annual Report to the ACP.	Report on impact	In the time since the accreditation visit Malcolm Allen, who had been Chair of the Board of Trustees since March 2015, was appointed as CEO, giving up the position of Chair of the Board which has been filled by the Vice Chair. His appointment has ensured that the new CEO was already very familiar with the aims & working of the organisation. This decision was taken by the Board of Trustees after the open recruitment was unsuccessful in appointing a new CEO in March 2017 and will be reviewed in 2 years time. Malcolm Allen has considerable	In this annual report.

		experience of being a CEO & is therefore able to ensure the stability, smooth running and financial management of the clinical training provision.	
That IPCAPA adopts a more formal approach to developing its future teachers and tutors and puts a succession plan in place by September 2018.	Thinking about how best to do this & then working out an action plan.	Discussions have already begun about the most appropriate way of doing this.	By Sept 2018.
That short-term measures are put in place to improve the learning environment for trainees especially access to library resources, computers and internet access at the <i>bpf</i> premises, and find ways to reduce the overcrowding on Tuesday afternoons/evenings and improving the quality and comfort of the learning environment.	Discussion with <i>bpf</i> General Manager about use of space.	There are long term plans for the <i>bpf</i> to move to more appropriate and centrally located premises. When that happens the new premises will be chosen specifically to be able to accommodate all trainees comfortably. In the interim a request has been made to <i>bpf</i> management about aspects of the building and its spaces to be able to offer our trainees the best possible learning environment.	No date given.
In the longer-term consideration is given to ensuring that the Knowledge and Information Technology Management Systems of respective partners <i>bpf</i> , AFC and UCL are fully compatible.	Gather information about the different systems & look into their compatibility	While it is not possible to change <i>bpf</i> systems as a whole to match those of AFC & UCL all access to reading lists etc. will be via UCL systems.	No date given.
That IPCAPA seeks additional expertise to support the team in developing and implementing a comprehensive equality and diversity strategy and should consider working in collaboration with similar training providers.	This matter will be discussed at the ACP Training Development Group to allow all training schools to pool knowledge and resources.	This matter will be discussed at the ACP Training Development Group to allow all training schools to pool knowledge and resources. IPCAPA is also considering using some funds to access help from a specialist provider to guide us in developing and implementing a comprehensive equality and diversity strategy.	No date given.
That IPCAPA ensures that those service supervisors who are temporarily without a trainee are given the same opportunity to give feedback to staff at IPCAPA as those who currently have trainees.	This has been noted and systems amended to ensure that it is implemented.	This has been carried out.	No date given, but action completed.
That IPCAPA supported by the ACP should continue to work collaboratively with NHS organisations to emphasise the impact of providing fewer or even no training placements on the future NHS workforce and the profession.	The Clinical Course Director and the Business Manager have consistently been involved in discussions about this. The Business Manager has good working relationships with those involved in directly commissioning training. The Business Manager has also contributed to information-gathering taking place about the costs of training.	This is an ongoing task which IPCAPA is actively engaged in.	No date given- always ongoing.
That IPCAPA make minor improvements to the complaints policy in relation to locating information for the various parties and making links to them in the handbooks.	Amendment to handbook & website.	This has already been incorporated into the 2017-8 handbook and an amended version is being prepared for the website.	No date given, but achieved in 2017-18 handbook.

Janine Sternberg
Clinical Course Director