

annual report to the training council of the ACP academic year 2017- 2018

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

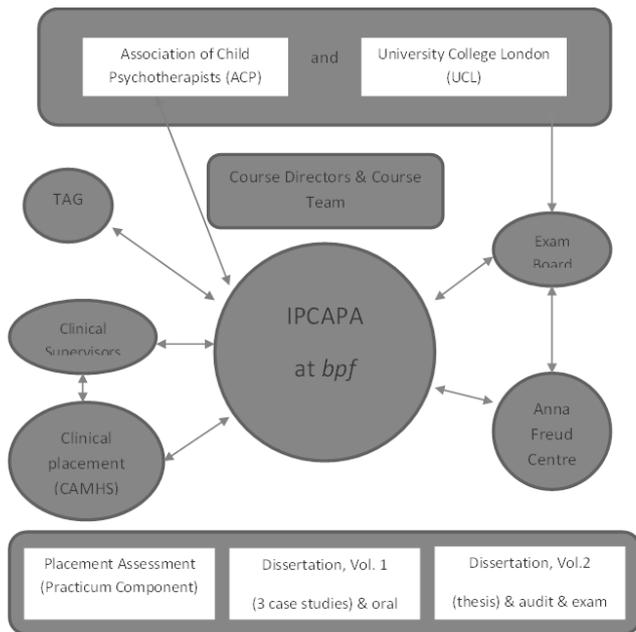
The clinical training in child and adolescent psychotherapy delivered through IPCAPA at the *bpf* is funded through a contract with Health Education England, monitored by Health Education England London and South East.

The management structure and organization of the *bpf* have not changed since the last annual report, except that the BPA has become independent and is no longer an association of the *bpf*.

This year marks an important milestone as it is the 1st one in which the cohort who began in 2014 on the UCL Doctorate in Child & Adolescent Psychoanalytic Psychotherapy (DPSych), which is delivered with the Anna Freud National Centre for Children and Families and the British Psychotherapy Foundation (*bpf*), are completing both their clinical training and their research- enabling some of them to achieve the award of DPSych from UCL and professional membership of the Association of Child Psychotherapists (ACP) as well as the *bpf*. We are delighted that our innovative and exciting new Doctorate in Child and Adolescent Psychotherapy, designed to be achievable in 4 years, has produced its 1st cohort of graduates.

During 2017-8, as in previous years, 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 doctorate programme) and the Business Manager aided by a curriculum lead. 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, and for part of this academic year the Academic Course Director was on sabbatical and the course tutor became more actively engaged in liaison meetings with the *bpf* team.

The person who had taken up the position of CEO in Summer 2017 unfortunately had to resign in Spring 2018 because of ill health. There is currently an interim CEO, who plans to be with the organization until 2020.



2. Staffing

There were no major changes in staffing during this academic year. The training administrator left after just over a year in post and after a brief period of unsettled staffing, the post was successfully recruited to.

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

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. We started the year with an innovative meeting attended by core staff, intensive case supervisors (ICS) as well as service supervisors (SS) and progress advisors. At that meeting various topics were considered in small groups. These included the role & responsibility of an ICS, the relationship between the SS & ICS, especially at time of tensions and the impact on the trainee; setting up an intensive case and communication with those outside of the ICS relationship; issues with endings, and the different perspectives of "endings" – the clinical setting and the training schools; supporting the trainee with areas of conflict and enabling self-awareness and understanding how the trainee's personal circumstances may impact on the close relationship with their intensive patient. In the following term CPD was offered in the form of hearing about a selection of audits that trainees had been involved in, with presentations of the findings which were often very thought-provoking. In the final CPD meeting of the year 3 senior and experienced service supervisors led a session on 'why are we doing this?', helping all those present to think carefully about choices made.

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. 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.

Through UCL, our university partner, staff who have honorary contracts with them (which has included the core team and year tutors and those involved with marking assignments) have opportunities to access their programmes for teaching staff. 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 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.

Staff have continued to be active in writing, with many papers, conference presentations, talks and publications, including a substantial number of 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.

4. Developments in curriculum

The curriculum of the IPCAPA professional doctoral training in Child and Adolescent Psychotherapy was delivered through a collaborative partnership of teaching delivered by IPCAPA and by AFC-UCL. We had 3 trainees not on this programme, who had begun with the Birkbeck programme and had taken longer to complete because of 0.8 working or maternity leave. Those trainees accessed the same clinical and academic teaching as the other trainees.

In this academic year we introduced our shorter training day (9.15-6.15) which was welcomed by trainees although they were also aware that some aspects of the programme, including a long tea break where socialising could take place, had had to be given up.

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.

As this marked the 4th year of our new doctoral programme with UCL and the 1st cohort to go through to completion we have had to discover what works well and have made adjustments through learning from experience.

As in previous academic years, 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. From consultation we decided to give closer attention to emerging ideas about trauma and the workshops this year looked at this from various angles, including the neurobiology of trauma, the impact of neglect, the Ego Ideal in relation to trauma, children's use of the body and trauma and working through trauma with parents and adopted children.

We also instituted a 'Christmas Treat' of an end of term mini conference for the trainees and those service supervisors who were able to attend. Following the Anna Freud & Play exhibition which was held at the Freud Museum and a day conference on this topic held at Kings College London, as part of a broader project on Anna Freud, which is ongoing, and which is committed to broadening the legacy of her work, especially in an interdisciplinary context, we were very pleased to have organised a version of this conference especially for bpf trainees. Some presentations were by those who trained with Anna Freud, while others examined her ideas and her influence.

We reinstated the case discussion forum twice a term. This is an opportunity for a trainee (usually in the later part of their training) to present a case to very experienced child psychotherapists (and we are grateful to Ann Horne for chairing, as well as Dilys Daws, Deirdre Dowling, Juliet Hopkins and others for their support and attendance) 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 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 continues to be revised according to topics suggested and the learning needs of the year group.

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

The group of 10 are entering the training in Autumn 2018- 2 men and 8 women.

All came through recognised preclinical courses, 2 from the Tavistock, 4 from the Anna Freud Centre, and 4 from the *bpf*/Birkbeck MSc. 1 of them is on the Jungian pathway. 1 of the trainees is from overseas, studying on a Tier 4 visa and with an honorary placement. 1 of our intake has alerted us to their specific learning needs. 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 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.

Their trainee placements are all in different NHS Trusts, five (including honorary placements) in London (Bexley CAMHS, Brent CAMHS, Greenwich CAMHS, Haringey CAMHS and Southwark Carelink), two in Kent Surrey Sussex (Lambeth CAMHS and a Kent inpatient facility; Hailsham CAMHS), 2 in East of England (Havering and Waltham Forrester CAMHS and Basildon CAMHS/AFC) and 1 in Southampton (CAMHS West).

1 prospective trainee who had been accepted and due to begin training had to withdraw for personal reasons shortly before beginning the course.

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

At the start of the year, Autumn 2017, there were 35 trainees enrolled- 9 in year 1, 7 in year 2, 9 in year 3 and 8 in year 4. There were also 2 trainees in year 5, 1 on maternity leave for part of the year and the other who had been working a 0.8 contract. There was 1 trainee on maternity leave from year 3.

Trainees are in 4 or 5 times weekly analysis. 1 of the training analysts who had been off sick in the previous year returned to work but then unfortunately had to stop work with her trainees. They were found other analysts through the Chair of IPCAPA's Training Analyst's Committee, who was supported by the Chair of the ACP's Student Analysts and Therapists subcommittee. A further trainee needed to change analyst and was helped to do so.

7. Qualifications since last report

During the academic year 2017-8 9 trainees qualified: There were 3 qualifications from the 2013 (2 delayed because of maternity leave, the 3rd by having reduced to a 0.8 contract to be involved in child care). A further 6 from the 2014 intake qualified in July 2018.

8. post-qualification employment

All of our graduates found suitable 1st destination employment with jobs in generic or specialist CAMH services. The graduate who had had a baby soon after completing last year has also returned to work part time in a voluntary sector organization.

9. academic completions (where appropriate)

We are delighted to report that in autumn 2018, in the period just after that covered by this report, 3 have been awarded their DPsych by UCL. They are the first graduates from our new programme and we are delighted with them as exemplars of the fact that both clinical qualification and academic research to professional doctoral level can be achieved within 4 years.

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

This year was the 4th year of our new doctorate programme with Anna Freud Centre/University College London. We still had 3 trainees who were not enrolled on that programme, having begun when we were in partnership with Birkbeck College. However, as they were not engaged in research with Birkbeck we did not have to be involved in working to 2 separate sets of university regulations. Our new doctoral programme, designed to ensure that trainees achieve their doctoral qualification within the 4 years of the training, is going well. As noted above in Autumn 2018 3 trainees had vivas on their research theses and were awarded their doctorates by UCL. All of the 2017-8 1st years successfully completed a critical reading exam and carried out a clinical audit, as well as settling in 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 continue to 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 it seems that we are striking the right balance.

3 recent graduates are still engaged with our doctoral programme with Birkbeck and are moving towards completion.

As has also been the case for the other training schools, IPCAPA has been actively involved in the considerable work that has taken place to try to keep abreast of and influence government plans about the future funding of child and adolescent psychotherapy training, which has been led from the ACP. Additionally, there have been a few transformations in Trusts where IPCAPA trainees have placements, often involving change of premises, and 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 last QCPM report for 2015-6 (the latest report). Since 2017, HEE reviewed how it delivered its responsibility with regard to commissioning and quality management and reduced the level of activity carried out for the review of 2016/17. Instead of the full QCPM process for the review of the academic year 2016/17 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 IPCAPA training has been successful in passing this scrutiny for 2016/17.

The Healthcare Professionals, Quality and Contract Performance Management Results which were published in 2017 included an example from IPCAPA (regarding user involvement in the selection process) within a Best Practice paper containing examples of developments that have been submitted by education providers as part of the Quality and Contract Performance Management process.

No complaints were received this academic year.

IPCAPA were commended on their user involvement in the selection process.

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	Reported on in last annual report and this, and to Training Development Group & Training Council (via Director of Training) in between.	Done last year's annual report
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.	This is being addressed in a number of ways. A new Curriculum Lead has been appointed and additional younger staff have been added to our core teaching team, who often shadow current teaching staff where possible. Recently qualified graduates have been recruited to teach on <i>bpf</i> /Birkbeck MSc and also on specific AFC courses to increase their teaching skills. A number of new tutors have been appointed from recent graduates. Our succession planning is under constant review, with further developments expected in our teaching team with a move to new premises in the coming few years.	By Sept 2018. Done
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. Discuss with AFC & UCL how best to manage this.	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. The IPCAPA training administrator has been tasked with ensuring that the reading lists for IPCAPA trainees are uploaded to UCL Moodle and that the trainees are aware of how to use this.. There is close liaison between IPCAPA & AFC administrators to ensure the smooth running of all communications with trainees.	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	No date given.

		equality and diversity strategy.	
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 has been prepared for the website.	No date given, but achieved in 2017-18 handbook.

Janine Sternberg
Clinical Course Director