

# **ADVANCED CLINICAL PRACTICE HANDBOOK**

**June 2022**

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## **INTRODUCTION TO THE NZAP ADVANCED CLINICAL PRACTICE PATHWAY**

The Advanced Clinical Practice (ACP) pathway to full membership of NZAP is in essence a training provided primarily through intensive supervision to help develop, integrate and build on the existing skills and modality of the candidate. What follows is a description of what this pathway entails, who it is suited for, and how it sits with other pathways to both membership of the Association and Registration as a psychotherapist.

This is not a training based on either curriculum or any particular modality of psychotherapy; it is however rooted in psychodynamic theory in the sense that it is expected that a candidate will have a good understanding of the workings of the unconscious and be able to demonstrate this understanding in their clinical work, via whichever theoretical modalities and principles guide their work.

### **Who is eligible to become an ACP candidate?**

#### **Preamble**

This training is for those who already have significant clinical experience, training, and their own personal psychotherapy (see prerequisites outlined below). The candidate also needs to have a supervisor who has agreed to work with them to achieve the Pathway. This supervisor must be a member of NZAP and be approved by the ACP Committee as an ACP Supervisor. (In exceptional circumstances variations to these requirements and the requirements listed below can be sought. Note however that variations will only be granted at the sole discretion of the ACP Committee)

#### **Prerequisites:**

There are three prerequisites which applicants to the ACP must complete prior to applying for entry into the ACP training pathway. The applicant needs to have completed:

1. A training in a modality or graduate studies that is relevant to psychotherapy (for example in counselling, applied psychology, clinical psychology, psychiatry, counselling social work etc.)
2. A minimum of 200 supervised hours of face-to-face individual clinical practice in a field relevant to psychotherapy, such as one of the fields described above..
3. A minimum of eighty hours of weekly personal psychotherapy completed over two consecutive years. This therapy must have been undertaken close in time to the point of application to the ACP Pathway.

#### **To Apply**

If you are considering applying to enter the ACP training pathway, your first point of contact is the NZAP administrator (Luisa Maloni, email: [admin@nzap.org.nz](mailto:admin@nzap.org.nz)) who will direct your inquiry to the initial application intake coordinator (Sue Morrison). The applicant must liaise with, and gain written confirmation from the ACP intake coordinator that the applicant has completed all the prerequisites listed above before the applicant formally submits their application to the ACP Committee. (If you submit an application before first gaining this confirmation from the intake coordinator, your application will be referred back to the intake coordinator who will liaise with you).

### **The initial interview**

If all the prerequisites described above are met, and on completion of the ACP Committee's receipt of the completed application pack (which includes a CV, questionnaire, supervisor endorsement and supervisor contract with the ACP committee) the candidate will be invited to attend an Initial ACP Panel Interview. The route to become an ACP candidate is through successfully passing this panel interview, usually held in one of the four main centers. The panel needs to feel satisfied that the applicant has the capacity and opportunity to reach the standard of the ACP within five years. Overall, the candidate is expected to demonstrate the capacity to be able to think about and practice safely while working with unconscious processes. The five specific assessment criteria for the Initial ACP Panel Interview are successful demonstration of a:

1. Well-developed capacity for empathic attunement to the other.
2. Well-developed capacity for self-reflection upon one's own emotional process.
3. Beginning capacity to formulate and work with unconscious process.
4. Willingness and capacity to learn.
5. Congruent high motivation to undertake the full ACP Pathway to completion.

The decision regarding the outcome of the initial panel, (which is conducted by three experienced NZAP members, at least one of whom is an ACP Committee member, in collaboration with an observer and a process facilitator) is reached through interview and demonstration of clinical work, including presentation of a five-minute recording with a client and a written dynamic formulation of this client.

Note: It is expected that the applicant will have received supervision on the choice of client, dynamic formulation, and choice of verbatim piece etc., in preparation for the initial panel interview.

Passing this panel interview along with completing an approved supervision contract enables Council to ratify the candidate as a Provisional Member of NZAP and an ACP candidate. Full details of this stage and its documentation are available through the NZAP Administrator.

- 2 Note that in addition to applications from non-members of NZAP, any full member of the Association can become an ACP candidate by completing a supervision contract with an approved Training Supervisor.

### **What are the requirements while undergoing the ACP Training Pathway?**

- 1 **Provisional** members must undertake to fulfil the terms of the First Supervision Contract with a Training Supervisor, and this contract must be endorsed by the local ACP Training Supervisors' Group (TSG) or a Chair of the National ACP Supervisors Group, and approved by the Chair of the ACP Committee. Supervision is required to be weekly, and additional requirements may be made, as recommended by the Initial ACP Interview Panel.

Candidates and their supervisor/s must annually submit a Supervision Contract to the ACP TSG and ACP Committee) for approval. This contract reviews progress and attests the frequency of supervision and then needs to be formally approved by the Chair of the ACP Committee.

## **2. Personal Therapy**

All candidates are required to undergo at least once-weekly psychotherapy for the duration of their ACP training. Once the candidate has completed and passed their written assessment they are not then required to continue personal therapy.

## **3. ACP Training Supervisors Groups (TSG)**

The ACP TSG is responsible for offering support and guidance to the candidate and their supervisor, although the actual forms of support and channels of advice will vary from region to region. If there is an anticipated difficulty in reaching the standard within five years, the ACP TSG may make a recommendation to the ACP Committee that an extension be granted. However, this should be done with caution, because if the Provisional Member has become Interim Registered on the basis of their Provisional Membership, this Registration lapses after five years and PBANZ may not approve an extension.

## **4. Leave of absence**

A Provisional Member can also, with the support of their supervisor, elect to take a period of up to three years out of the process by resigning from the Association and becoming a Correspondent, if desired. It is also expected that the candidate will inform PBANZ and forfeit their PBANZ interim registration until they recommence the Pathway. To recommence this process, the Provisional Member is required to have a new approved supervision contract and pay the appropriate subscription. This period of leave from the process has no impact on their Interim Registration, which only runs continuously for five years. Should the Provisional Member be out of the process for longer than three years, s/he must reapply to become a Provisional Member through the Initial Regional Panel.

**note:** Full NZAP members who are candidates for the ACP have no time limit for reaching the standard required nor is weekly supervision mandatory, although it would be strongly recommended.

## **Experienced practitioners and readiness for assessment**

While there is an expected maximum time of five years spent in this training process, there is no minimum time and the assessment phase of this pathway can begin at any time with the agreement of the Training Supervisor. It is therefore also a suitable process for experienced psychotherapists who have newly arrived in the country and who cannot achieve membership easily through Registration. Their Training Supervisor can discern any needs for cultural knowledge and Treaty understandings as well as readiness to present historical or current work for assessment.

## **Relationship between the NZAP ACP and the Psychotherapists' Registration Board (PBANZ)**

The achievement of the ACP qualifies people to become both Full Members of the Association and to achieve full Registration as a psychotherapist, although they are quite separate procedures. The Board has approved our development and assessment process as a pathway to registration through professional development.

*Further and more detailed information about the above matters can be obtained by an enquiry in the first instance to the administrator of NZAP who can direct you to the Chair of the ACP Committee if needed.*

*The following pages all relate to the **end point** of the ACP, that is the policies and procedures surrounding the final assessment.*

## **I PREREQUISITES FOR NZAP ACP (PREVIOUSLY PREREQUISITES FOR MEMBERSHIP OF NZAP)**

Candidates will demonstrate through submission of a **Therapeutic Study and Work Practice Description** and by presentation for an **assessment interview** that they are **competent** in the practice of psychotherapy and that they undertake such practice with **integrity** and **safety**.

**Competency** refers to the ability to:

- Demonstrate having managed a psychotherapy practice comprising a range of clients, not fewer than 8 per week, with safety and integrity, during at least part of their time as a Candidate;
- Conceptualize clinical data in order to make a dynamic formulation and clinical appraisal;
- Assess suitability for psychotherapy and the most appropriate form of psychotherapy;
- Demonstrate adequate knowledge of psychosocial development, personality theory, psychopathology and psychological and psychotherapeutic research;
- Demonstrate a range of psychotherapeutic techniques;
- Integrate theory with practice;
- Create and maintain an adequate therapeutic context;
- Establish and maintain a therapeutic alliance;
- Understand and work with psychological processes (such as transference, counter-transference and psychological defence mechanisms) and demonstrate the integration of this understanding in the practice of psychotherapy;
- Work with the client's therapeutic needs and concerns with appropriate flexibility;
- Facilitate and assess therapeutic progress;
- Identify and work appropriately with different phases of therapy, including bringing therapy to a satisfactory closure;
- Show evidence of self-awareness.

**Integrity and safety** refer to the capacity to:

- Understand and adhere to the Association's Code of Ethics and Practice Guidelines;
- Show knowledge of and sensitivity toward the bicultural and multicultural nature of New Zealand society;
- Use supervision effectively;
- Be aware of sociocultural conditioning on gender functioning;
- Recognize the limits of his or her own expertise;
- Recognize when to refer to another health professional;
- Be trustworthy, reliable and respectful;
- Maintain client confidentiality;
- Be able to recognize and respond appropriately to clients who may be a danger to themselves or others;
- Foster self-care attitudes and skills in clients;
- Exercise adequate self-care;
- Maintain working relationships with colleagues and referral persons/agencies;
- Have adequate knowledge of prescribed medications and other drugs;
- Be familiar with legislative provisions and their effects on the well-being and rights of clients and their families and on the practice of psychotherapy.

## **II GENERAL REQUIREMENTS FOR CANDIDATES FOR NZAP ACP**

### **Variation to procedures**

It is emphasized that in unusual circumstances, the ACP Committee may at its discretion vary any prescribed requirement or procedure after considering a written request and justification from a candidate with a letter of support from the Convenor of the appropriate TSG.

### **Supervision**

Candidates will be required to have weekly supervision for the duration of the ACP with a training supervisor who either holds the NZAP ACP and is a member of a TSG or has been approved as a Training Supervisor by the ACP Committee. For more information please contact the ACP Registrar.

For more detail of the ACP Committee's expectations of the supervision role, please look at the initial contract between the ACP Committee and the supervisor (see page 28), and the first training contract between an ACP candidate and their primary training supervisor (see page 29).

### **Time frame for completing the ACP assessment**

There is no mandatory time frame for candidates who are Full Members of NZAP.

It is ordinarily expected that a candidate who is a Provisional Member of NZAP will complete the assessment process and become eligible for Full Membership of the Association within five years of becoming a candidate.

If a Provisional Member considers there are extenuating circumstances, s/he may, after consultation with his or her Supervisor, make application to the Convenor of the TSG to support a request for an extension of time to complete the process. If the TSG supports this request, an application may then be made to the ACP Committee who will consider granting an extension.

It is recommended that those who foresee a need to apply for an extension of time do so as early in the process as possible.

A Provisional Member, with the support of their supervisor, can elect to take a period of up to three years out of the process by resigning from the Association and if s/he wishes, becoming a Correspondent. To recommence the process, the Provisional Member is required to present a supervision contract to their TSG, have this accepted, and pay the appropriate annual subscription. Should the Provisional Member remain out of the process for longer than three years, s/he must reapply to be a Provisional Member through the appropriate regional procedures.

If a Provisional Member fails to seek or is not granted an extension, the ACP Committee may, after the expiration of five years, recommend that the NZAP Council cancel the person's Provisional Membership. If the person subsequently wishes to pursue membership of the Association, s/he must reapply to be a Provisional Member through the appropriate regional procedures.

There is no minimum time that must pass between becoming a candidate and presenting for assessment for the ACP. A candidate should be guided by his or her supervisor as to readiness to proceed.

## **Documentation**

It is the responsibility of the candidate to keep copies of all documentation relating to the assessment process.

## **Correspondence**

Except where explicitly stated otherwise, all correspondence, copies of written material, etc., should be addressed to:

The Administrator  
NZAP  
PO Box 20054  
Glen Eden  
Auckland 0641

## **III ASSESSMENT OF WORK PRACTICE DESCRIPTION AND THERAPEUTIC STUDY**

### **Aims**

- 1 The assessment will appraise by review of a work practice description whether the candidate's work practice is congruent with the qualities, standards and workload required by the **Prerequisites for NZAP ACP** (page 6).
- 2 The assessment will determine by review of a therapeutic study whether the candidate's psychotherapeutic practices are congruent with the qualities and skills itemized in the **Prerequisites for NZAP ACP** (page 6).
- 3 The assessment criteria and process of marking are aimed at ensuring standardization of marking in order to secure fairness for candidates and to encourage consistent standards of practice throughout the country.

### **Requirements**

There is no minimum time period which must elapse before a candidate may submit a Therapeutic Study and Work Practice Description for assessment.

A current supervisor's report supporting the candidate's readiness to proceed to this first stage of the assessment process must be obtained prior to submission of written work.

Written material must be typed double-spaced and single-sided on A4 paper. Pages for each piece of work must be numbered and dated and must be bound in a single document. Two separate documents, Work Practice Description and Therapeutic Study, are submitted.

**Candidates are asked to advise the Administrator in writing, eight weeks in advance of the advertised date, that they will be submitting their work practice description and therapeutic study for assessment. This advice will be accompanied by a non-**

**refundable administration fee equal to half the marking fee, with the balance paid when the written work is submitted.**

**The training supervisor is also required to attest to the Advanced Clinical Practice Committee Chair that they have read a completed and satisfactory first draft of the written material before the candidate's notification of intention to submit is accepted. This also needs to be notified eight weeks in advance.**

### **Final check**

Before sending **5 copies** of the **Work Practice Description** and **Therapeutic Study** to the **Administrator**, ensure that the following are included:

- A **supervisor's report, completed within the last 6 months;**
- A **declaration** of preservation of **client confidentiality** in the content of both pieces of written work;
- A declaration of the **word count** of the Therapeutic Study and of the Work Practice Description.

It is advised that the package be sent by courier rather than ordinary post.

If work is being **resubmitted** for marking in the **same marking round**, ensure that **5 copies of the resubmitted work** and **5 copies of the markers' letters** are included.

**If resubmitting in a new marking round, both Work Practice Description and Therapeutic Study must be included, together with any other documentation from markers, even if one or other has been previously passed.** As before, it is strongly advised that the package be sent by courier.

### **Supervisor's report**

The supervisor's report will attest to the following:

- That the candidate's progress has been discussed in the TSG;
- That the candidate is considered by the supervisor to have reached a suitable level of professional development as a psychotherapist in order to be ready for assessment for admission to Full Membership of NZAP;
- That the supervisor considers the candidate practices psychotherapy with integrity and in a safe and ethical manner;
- That the supervisor believes that the information in the candidate's Work Practice Description is accurate, and that the Therapeutic Study is an accurate reflection of the work which was supervised.
- That although the Work Practice Description and the Therapeutic Study have been read by the supervisor and discussed subsequently in supervision, the assembly of the material and the writing have been the work of the candidate;
- That the supervisor would accept the candidate as a colleague. The supervisor's report must be typewritten.

### **Procedures for assessment**

- Assessors should themselves have the NZAP ACP and should have a minimum of

- three years' post-qualification (or equivalent) experience.
- The Association will provide training and support for assessors.
- An assessor shall not have, or have had in the past, a significant relationship with the candidate whose work is being assessed. If possible, the assessor should live and work in a different region from the candidate and not belong to the same TSG as the candidate's supervisor.
- To the extent that it is possible, there should be a fit between the therapeutic modality of the candidate and the assessor.

### **Functions of moderators**

Moderators shall be experienced assessors appointed by the ACP Committee in relation to the marking of Work Practice Descriptions and Therapeutic Studies. One moderator takes prime responsibility for each marking round.

The functions of the moderators are to:

- Oversee the process of marking;
- Monitor national standards of work presented;
- Monitor national standards of marking and assist in the development and maintenance of consistency of such standards;
- Assist the ACP Committee in resolution of conflict which may arise within the process of marking;
- Be consulted by the ACP Committee in the course of any review which may be lodged by a candidate.

### **Mode of marking**

In the interests of monitoring national standards of marking and to ensure quality and consistency, the moderators have been empowered by Council to convene groups for the purpose of marking written work.

The process is as follows:

- Markers are chosen given the stipulations listed under **Procedures for assessment** above with the additional stipulation that no supervisor of a candidate whose work is being assessed can participate.
- The markers are assigned work in pairs, with each considering the work in detail and marking it separately before conferring to reach an agreed rating for each criterion. The marking pair then presents both their ratings and the rationale for these to the marking group, the purpose being to ensure quality and consistency and also to moderate any extreme standards held by a particular marker.
- As far as possible, consensus is used to determine the outcome, with the moderators having the final say as to whether work meets the standard or not.
- At the conclusion of the marking process the primary marking pair takes responsibility for writing to the candidate outlining their decision and how this was reached. In the event of a resubmission, particular attention will be paid to areas where improvement was needed.
- About a week later the letters will be followed up by a phone call from a moderator to ensure that the candidate understands what is being asked of him or her in preparing their resubmission.

## **Requirements for presentation of Work Practice Description**

A **Work Practice Description** not exceeding 4000 words will be presented with the **Therapeutic Study**.

It must be accompanied by a preface declaring that:

- The candidate manages a case load of no fewer than 8 clients per week;
- The candidate's clients have a range of presenting problems;
- A declaration of the word count.

This preface is not included in the 4000 word count.

The **Work Practice Description** comprises:

- 1 A written account which will include a description of the candidate's development as a psychotherapist, describe the core concepts which inform the candidate's understanding of psychotherapy and identify the principal therapeutic modality which typifies the candidate's practice of psychotherapy;
- 2 A work practice description liberally illustrated with brief case vignettes demonstrating the practical application of the professional requirements.

The candidate's current supervisor is required to endorse in the supervisor's report the accuracy of the Work Practice Description.

**Assessment of the Work Practice Description and of the Therapeutic Study will not proceed unless all the above criteria are met and the documents are accompanied by a report from the current supervisor and by the required marking fee (see Schedule of Fees, page 28).**

## **Assessment sheets for Work Practice Description**

### ***Method of Marking***

Items can be rated [0], [1], or [2]. For each item, the assessor will check the number in square brackets beside the description which is most applicable to the candidate's work practice as represented in the work practice description.

Markers may also use material from the Therapeutic Study to reach a rating for categories within the Work Practice Description. This could mean that a rating in any category in the Work Practice Description could be increased or decreased depending on evidence demonstrated in the Therapeutic Study.

#### **1 Management of therapeutic setting**

Candidate demonstrates:

- [0] no ability to manage the therapeutic setting
- [1] some ability to manage the therapeutic setting
- [2] good ability to manage the therapeutic setting

#### **2 Managing electronic communication, digital records and confidentiality**

Candidate demonstrates:

- [0] no capacity to manage boundary keeping and confidentiality
- [1] some awareness, knowledge and management
- [2] good capacity to manage communication, record-keeping and security

*Note: This refers to: effective boundary keeping with skype, text, email and social media (eg Facebook); handling online transactions or payments; along with management of secure storage of records in the cloud (eg Dropbox).*

#### **3 Code of Ethics**

Candidate demonstrates:

- [0] no knowledge of the Code of Ethics
- [1] some knowledge and understanding of the Code of Ethics
- [2] knowledge, understanding and adherence to the Code of Ethics

#### **4 Biculturalism**

Candidate demonstrates:

- [0] no knowledge of or sensitivity toward biculturalism
- [1] some knowledge of and sensitivity toward biculturalism
- [2] good knowledge of and sensitivity toward the bicultural nature of NZ society with this reflected in work practice

## **5 Multiculturalism**

Candidate demonstrates:

- [0] no knowledge of or sensitivity toward multiculturalism
- [1] some knowledge of or sensitivity toward multiculturalism
- [2] good knowledge of and sensitivity toward the multicultural nature of NZ society with this reflected in work practice

## **6 Criteria for referral to another health professional**

Candidate demonstrates

- [0] no appreciation of when to refer
- [1] some awareness of when to refer
- [2] clear and appropriate criteria for referral to another health professional

## **7 Recognizing limits to own expertise**

Candidate demonstrates:

- [0] no appreciation of limits to own expertise
- [1] some awareness of limits to own expertise
- [2] good awareness of limits to own expertise

## **8 Client confidentiality**

Candidate demonstrates:

- [0] no maintenance of client confidentiality
- [1] inadequate maintenance of client confidentiality
- [2] appropriate maintenance of client confidentiality

## **9 Client dangerousness to self or others**

Candidate demonstrates:

- [0] no ability to recognize and respond appropriately to potential danger
- [1] inadequate ability to recognize and respond appropriately to potential danger
- [2] good ability to recognize and respond appropriately to potential danger

## **10 Therapist self-care**

Candidate shows:

- [0] no appreciation of need for self-care
- [1] some evidence of self-care
- [2] shows good appreciation of need for self-care and details methods by which this is achieved

### **11 Working relationships with other professionals**

Candidate demonstrates:

- [0] no evidence of maintaining working relations with other professionals
- [1] some evidence of maintaining working relations with other professionals
- [2] good evidence of maintaining satisfactory working relations with colleagues, referral persons/agencies and other relevant professionals

### **12 Gender issues**

Candidate shows:

- [0] no awareness of sociocultural conditioning on gender functioning
- [1] some awareness of sociocultural conditioning on gender functioning
- [2] good awareness of sociocultural conditioning on gender functioning with this reflected in work practice

### **13 Prescribed medications and other drugs**

Candidate demonstrates:

- [0] no knowledge of prescribed medications and other drugs
- [1] some knowledge of prescribed medications and other drugs
- [2] good knowledge of prescribed medications and other drugs

### **14 Legislation relevant to client care and practice of psychotherapy**

Candidate displays:

- [0] no awareness of relevant legislation
- [1] some knowledge and awareness of relevant legislation
- [2] a working knowledge of relevant legislation and demonstrates that this is taken into account in work practice

### **15 Use of supervision in clinical practice**

Candidate displays:

- [0] no evidence in relation to other categories in the Work Practice Description
- [1] some evidence in relation to other categories
- [2] good evidence in relation to other categories

## **Guidelines for preparation of Therapeutic Study**

The subject chosen for the **Therapeutic Study** should be an example typical of the candidate's psychotherapy practice. The study may describe work with a child, adolescent, adult, couple, family or group.

The candidate will submit one Therapeutic Study of 6000 and **no more than** 7000 words (including the table of contents and excluding the references) accompanied by a declaration of the word count. (The word count is important and any appendices or other additions to the study must be included in the count; studies that exceed the count will be returned.) This study is to give an account of psychotherapy with a client. The subject of the Therapeutic Study should be selected in order to enable the candidate to best demonstrate those attributes and abilities laid out in the **Prerequisites for NZAP ACP** (page 6).

The focus of the Therapeutic Study should centre on the therapist and the therapist's work with the client(s) rather than primarily on the client(s). The capacities for self-reflection and enquiry should be apparent. It should be clear that the candidate has a good understanding of the nature and development of the therapeutic relationship with the particular client(s). The influences of supervision, reading and other learning experiences should be discussed in relation to the work.

The Therapeutic Study should demonstrate that the candidate is competent in the practice of psychotherapy and undertakes psychotherapy with integrity and safety, as judged by the criteria laid out in the **Prerequisites for NZAP ACP** (page 6).

The Therapeutic Study and Work Practice Description should be written in a manner which allows them to be understood by an assessor who does not practice in the same therapeutic modality. However, it should also be apparent that the candidate has an appropriate depth of learning in his or her primary modality. **If a therapy involving trauma is selected for the Therapeutic Study it must also be described from a developmental perspective.**

It is strongly recommended that the Therapeutic Study be proofread and checked for grammar and readability.

The Therapeutic Study may not be accepted for assessment if, in the opinion of the moderator, it does not follow sufficiently closely the recommended format outlined below.

### **Format of Therapeutic Study**

The format of the Therapeutic Study should include the following:

- Title
- Table of contents
- Brief synopsis of study
- Initial presentation of client
- Client history
- Dynamic formulation \*
- Clinical Diagnosis
- Suitability for psychotherapy
- Initial phase of therapy

Middle phase of therapy  
Termination phase of therapy  
Discussion  
Conclusion  
References

- \* The dynamic formulation should comprise an explanatory hypothesis about the origins and maintenance of the client's psychological and interpersonal functioning expressed according to the particular theoretical base of the candidate's preferred modality.

## Assessment sheets for Therapeutic Study

### **Method of Marking**

Items can be rated [0], [1], or [2]. For each item, the assessor will check the number in square brackets beside the description which is most applicable to the candidate's psychotherapy. **The five items listed with [cc] are core competencies and a '2' in all five are mandatory.**

### **Competency**

#### **1 Dynamic formulation [cc]**

Candidate demonstrates:

- [0] no ability to make a dynamic formulation
- [1] some ability to make a dynamic formulation
- [2] good ability to make a dynamic formulation

#### **2 Clinical diagnosis [cc]**

Candidate demonstrates:

- [0] no ability to make a clinical diagnosis
- [1] some ability to make a clinical diagnosis
- [2] good ability to make a clinical diagnosis

#### **3 Suitability for psychotherapy**

Candidate demonstrates:

- [0] no ability to assess suitability for psychotherapy
- [1] some ability to assess suitability for psychotherapy
- [2] good ability to assess suitability for psychotherapy

#### **4 Theoretical knowledge [cc]**

Candidate demonstrates:

- [0] no theoretical knowledge
- [1] some theoretical knowledge
- [2] adequate knowledge

#### **5 Integration of theory with practice [cc]**

Candidate demonstrates:

- [0] no integration of theory with practice
- [1] some integration of theory with practice
- [2] good integration of theory with practice

**6 Conscious and unconscious psychological processes (such as, transference, counter-transference and psychological defence mechanisms) [cc]**

Candidate demonstrates:

- [0] no awareness of psychological processes
- [1] some awareness of psychological processes
- [2] awareness of and ability to utilize psychological processes in psychotherapy

**7 Therapeutic relationship: ability to engage in an effective therapeutic relationship which progresses the therapeutic outcome**

Candidate demonstrates:

- [0] little ability to engage
- [1] some ability to engage
- [2] good ability to engage

**8 Phases of therapy**

Candidate demonstrates:

- [0] no ability to identify different phases of therapy
- [1] ability to identify phases of therapy but little ability to work appropriately within them
- [2] good ability to identify phases of therapy and to work appropriately within them

**9 Self-awareness**

Candidate demonstrates:

- [0] no self-awareness or understanding of own psychological processes
- [1] some self-awareness and understanding of own psychological processes
- [2] good self-awareness and understanding of own psychological processes

**10 Candidate demonstrates how they have thought about, and made use of supervision, including in the area of counter-transference**

Candidate demonstrates:

- [0] no capacity to use supervision effectively
- [1] some capacity to use supervision effectively
- [2] good ability to use supervision effectively

## Rating of assessments of Work Practice Description and Therapeutic Study

A **pass** will be accorded when the following standards are met:

**12 items attain a rating at the [2] level in the Work Practice Description and 8 in the Therapeutic Study, including all the core competencies: clinical diagnosis, dynamic formulation, theoretical knowledge, integration of theory and practice, and conscious and unconscious psychological processes.**

Each piece of work may be passed or deferred independently of the other.

As noted above (see **Mode of marking** page 10), at the conclusion of the marking process the markers will write a letter outlining their decision and how this was reached.

Candidates whose work is not passed on initial assessment have the opportunity to revise and resubmit the work; see the **Resubmission** guidelines below. For these candidates the markers' letter will outline what needs to be done to meet the required standard, and in addition the letter will be followed up by a phone call from a moderator to ensure that the candidate understands what is being asked of him or her in preparing their resubmission.

### Resubmission

Any person whose Work Practice Description and/or Therapeutic Study is not accepted may amend and resubmit the work within one month. An additional word allocation of up to 400 words for the Work Practice Description and up to 700 words for the Therapeutic Study may be used to amend the work and address the issues identified by the markers. Resubmission must clearly indicate new or altered material by means of italics, bold text or underlining. The candidate **will resubmit 5 copies of the work** together with **5 copies of the previous markers' letters** to the Administrator. The work will be returned to the original markers for their consideration. There is no resubmission fee.

### Deferral

If a candidate's work is not accepted and the person chooses not to resubmit within one month, or if the resubmitted work is again not accepted, the work shall be deferred. The candidate should then follow the usual procedures for submission of written work, no sooner than the next scheduled submission date.

A resubmission fee applies for resubmission following deferral (see **Schedule of Fees**, page 28).

### Review

A candidate whose work has not passed may request a review if there are grounds for believing there may have been an **error of process** in the assessment of the Work Practice Description and/or Therapeutic Study. The request for a review shall be lodged in writing to the Administrator within one calendar month of notification of the result and be accompanied by a fee equivalent to the marking fee.

At the discretion of the Chair of the ACP Committee and after consultation, as necessary, with the moderators and members of the ACP Committee, an independent reviewer may

be appointed. The reviewer shall report to the ACP Committee which will determine the remedy, if any is warranted. The Chair will advise the candidate of the outcome.

In the event of the reviewer finding the grounds for requesting a review to be valid, the review fee will be refunded.

### **Time limit**

If a Provisional Member does not successfully complete the assessment interview within **five years** of having the written work accepted, its currency will normally expire.

## **IV ASSESSMENT INTERVIEW**

### **Aim**

The assessment interview is the final stage in determining whether the candidate meets the clinical and ethical standards outlined in the **Prerequisites for NZAP ACP** (page 6).

The aim of the assessment interview is to give the candidate the opportunity to demonstrate their personal attributes as a psychotherapist who has integrated theory and practice.

The assessment is expected to explore another dimension to that which has already been assessed through the written work. The panel will be looking for a quality of confidence and congruence in the candidate which reflects presence and the demonstration of an ability to be a competent therapist who practices with integrity and safety.

The candidate will show that they are capable of reflecting in a mature way, demonstrating a flexibility of thinking and capacity to manage their feelings while under stress.

### **Procedures**

- 1 When a candidate's Therapeutic Study and Work Practice Description have been assessed as being satisfactory, the candidate may inform the Administrator of his or her wish to present for an assessment interview. **At least 8 weeks' notice** will be given by the candidate of the desire to present at a particular assessment time.
- 2 The application will be accompanied by:
  - a. Five copies of the current supervisor's attestation. This will include:
    - The supervisee's progress has been discussed in a Training Supervisor's Group;
    - The supervisor considers the supervisee to have reached a suitable level of professional development as a psychotherapist so as to be ready for assessment for admission to NZAP as a Full Member;
    - The supervisor considers the supervisee to be practising psychotherapy with integrity and in a safe, ethical manner;
    - The supervisor accepts the supervisee as a colleague.
  - b. Five copies of a clinical account of up to 350 words, including a brief dynamic formulation, which will place in context the recorded segment the candidate has chosen for the assessment interview (see **Expectations of the candidate** page 25). The recording and transcript should **not** be included.

- c. Five copies of the Work Practice Description and Therapeutic Study.
  - d. Five copies of all letters written by the markers to the candidate.
  - e. If a candidate has previously been deferred following an assessment interview, five copies of the letter from the Chair of the previous assessment interview.
  - f. The prescribed fee (see **Schedule of Fees** page 28).
- 3 Assessment interviews will be held biannually at times to be determined by the ACP Committee, usually in April and September. The dates set for assessment interviews will be notified in the Association Newsletter at least six months in advance.
  - 4 Panels comprising three **assessors** will be appointed by the ACP Committee to undertake the assessment interviews.
  - 5 An **observer** will be appointed for each panel to attend to any process matters which may arise in the course of the assessment interview.
  - 6 An **assessment coordinator** will be appointed to oversee the organization and management of the assessment interviews on the day. This person will usually be a member of the ACP Committee.
  - 7 A senior member of the Association will be appointed overall **process facilitator** (usually the assessment coordinator) to be available at the request of any assessor, observer or candidate with concerns about process which cannot be resolved within the assessment interview. The candidate may initiate the involvement of the process facilitator at any time during the interview prior to the commencement of the panel's deliberations. The assessors and observer may initiate involvement at any stage in the process.
  - 8 Assessors and observers shall usually themselves hold an NZAP ACP and usually have a minimum of three years' post-qualification experience.
  - 9 The Association will provide instruction for assessors. Newly appointed assessors will not undertake assessments until they have received such instruction.
  - 10 An assessor or observer shall not have or have had a significant relationship with the candidate who is being assessed. If possible, a panelist should live and work in a different region from the candidate and not be drawn from the same TSG as the candidate's supervisor.
  - 11 There should be a range of therapeutic modalities represented amongst panel members.
  - 12 The assessors shall appoint one of their number as Chair.
  - 13 Panelists are charged with the responsibility of entering into an interactive process with the candidate in a manner which allows the development of a collegial relationship to the extent that this is compatible with their role as assessors.

### **Guidelines for assessors**

An assessor's task is to decide whether the candidate is a competent and ethical psychotherapist. To help achieve this, assessors will facilitate an appropriately open and

transparent climate that invites a collegial exchange of ideas with the candidate and with each other.

- 1 At the beginning, identify aspects of practice in the candidate's presentation which can be commented upon favourably.
- 2 Ask only one question at a time. It is important for the candidate to be able to focus on one question before being asked a second or third.
- 3 Ask specifically for the information required. Find another way of phrasing the question if the response is not satisfactory.
- 4 Give the candidate adequate feedback on responses to questions and on the recorded presentation.
- 5 Seek the candidate's strengths and competencies. If problem areas become apparent, explore with questions, such as, "Will you please explain that to me?" or "Will you please tell me more about that?" Once a genuine weakness has been established, do not remain focused on that area but look for other, possibly counterbalancing, strengths.
- 6 Pay attention to and be willing to understand the candidate's frame of reference. It may be different from the assessor's and equally valid. The candidate may be able to offer a sufficient justification for a particular theoretical approach or intervention if given suitable encouragement.
- 7 If the candidate is being reassessed following a deferral, ask how the candidate dealt with the deferral.
- 8 Do not teach or supervise the candidate. That is not within the role of an assessor.
- 9 Questions relating to the candidate's own therapy should be asked with respect and only if there is particular need.
- 10 Be aware of and interact with other members of the panel in a way that facilitates team work. Encourage the candidate to respond to the panel's thinking so that a mutually evolving conversation is created.
- 11 If an assessor starts to have concerns about the process of the panel, ask the Chair to call in the process facilitator (usually the assessment coordinator) at an early stage. Taking too long to decide on the acceptance or deferral of the candidate may be an indication for seeking the assistance of the process facilitator.
- 12 Panel members are encouraged to be open about any prejudice or doubt about a candidate during their preparation as a panel, so that the observer can take this information into account during the assessment process. During the interview panelists are encouraged to be open about their impressions of the candidate and their presentation.
- 13 The content and process of the assessment are confidential and, if necessary, may be discussed by panel members only with the Chair of the ACP Committee or any ad hoc body established by the Chair for that purpose.

## **Function of panel Chair**

The Chair of each panel should be an experienced assessor. The tasks of the Chair are as follows:

- 1 To take responsibility for helping the assessors to get to know one another and become comfortable working together before the assessment begins;
- 2 To check the candidate's documentation and lead any preparatory discussion arising from this;
- 3 To welcome the candidate into the room, introduce the assessors and assist in the establishment of rapport;
- 4 To protect the candidate and safeguard his/her rights;
- 5 To lead (but not dominate) discussion during the assessment and observe/confront/support the panel with regard to:
  - energy level
  - questions (clarity, conciseness, cooperation)
  - feedback (verbal/non-verbal);
- 6 To keep the assessment process moving;
- 7 To call in the process facilitator at the request of the candidate or any panel member or the observer;
- 8 To invite comment from the observer on panel process at any time but always prior to the commencement of the panel deliberations;
- 9 To check when the panel has sufficient information to break for private deliberation and also when it is ready to draw the assessment interview to a close, including opportunity for final comment by panelists and candidate;
- 10 To arrange for the candidate to wait nearby while the panel is deliberating and to invite them back into the room once the panel have completed their discussions;
- 11 To ensure each assessor completes an assessment form; to collate the results, chair any discussion and determine the outcome, i.e. whether the candidate is accepted or deferred, and to ensure all documentation is collected;
- 12 To ensure that the candidate's paperwork is returned to the candidate.

## **Function of observer**

An observer should be an experienced psychotherapist. An observer is not an assessor. The tasks of the observer are as follows:

- 1 To observe and monitor process during the assessment interview, including the deliberations of the panel;
- 2 To take the initiative in commenting on process;

- 3 If concerned about panel process during the assessment interview, to request that the Chair invite the process facilitator in to discuss the panel process. In this event the interview is adjourned and the candidate leaves the room. Such a step may be taken if the observer notes, for instance, competitiveness between panel members or 'rescuing' of the candidate or an 'adversarial tone' which does not shift in response to feedback from the observer.

### **Format of assessment interview**

The assessment interview will usually take approximately two hours in total. The first hour will comprise introductions, presentation of recorded work and some discussion and exploration. The second hour will include a break for the panel to confer without the candidate, and then further discussion. The panel will further confer after the end of the interview.

### **Expectations of the candidate**

The candidate is expected to meet the panel as a professional associating with colleagues. The candidate is therefore required to demonstrate presence, personal autonomy and integrity and to manage their anxiety in a manner that allows collegial interaction to build in the interview.

The candidate should be prepared to respond to any questions the panel may have stemming from the therapeutic study or work practice description, or any aspect of the assessments of these.

The candidate shall select a **5 minute** audio or video recording excerpt of a psychotherapy session conducted within the last six months with a client other than that selected for the case study and which s/he considers is representative of his or her style of psychotherapy and adequately displays his or her skills. The candidate will prepare a transcript of the recording for the panel (4 copies) together with a clinical account of up to 350 words including a brief dynamic formulation (4 copies) which will place in context the recorded segment the candidate has chosen for the assessment interview. The recording will be played to the panel and form a basis for discussion of the candidate's work.

The candidate's theoretical knowledge base may be explored, as well as their understanding and adherence to the Association's Code of Ethics. The candidate has responsibility for satisfying the panel that s/he is competent in the practice of psychotherapy and practices with integrity and safety.

### **Outcome of the assessment**

The candidate will be notified of the outcome by the Assessment Coordinator by telephone or by letter.

**Form for evaluation of assessors**

Candidates, please rate each member of your panel and observer. In each area, please rate each assessor/observer:

- excellent** 4
- average** 3
- adequate/average** 2
- average** 1
- poor** 0

Please total scores at the bottom of the columns. Feel free to write any comments you might have. Your evaluation will help ensure NZAP assessment panels are of a high standard.

Thank you for your help.

		<i><b>Assessor/Observer Names</b></i>			
Your name + place/date Chairperson of panel					
<b>1</b>	Questions were clear and concise				
<b>2</b>	Gave candidate opportunity to state/defend opinions				
<b>3</b>	Willing to consider approaches different from own				
<b>4</b>	Clear about requirements of interview				
<b>5</b>	Gave candidate clear feedback				
<b>6</b>	Made effort to find candidate’s strengths				
<b>7</b>	Was congruent in his/her behavior				
<b>8</b>	Asked questions appropriate to level of interview				
<b>9</b>	Was alert and carried fair share of interview				
<b>10</b>	Stated reasons for opinions and differences				

Your name + place/date Chairperson of panel					
<b>11</b>	Related warmly and respectfully to candidate				
<b>12</b>	Terminated interview appropriately				
<b>TOTALS (out of 48)</b>					

**Comments:**

## Appeals

A candidate who believes there has been a **significant error of process** in relation to his or her assessment interview may appeal in writing within one calendar month to the Administrator, accompanying such appeal with payment of a fee equivalent to that set for the assessment interview.

Appeals may not be lodged against the assessment panel's recommendation as to whether or not the candidate be accepted for full membership of the Association.

The Chair of the ACP Committee, in consultation with the Committee and/or an ad hoc committee established for that purpose, will determine whether the appeal is upheld.

If it is established that there has been a significant failure of process, the candidate may present again for assessment at the next regular opportunity without payment of fees. In addition, the appeal fee will be refunded.

## V APPROVAL BY COUNCIL

Council will be informed by the Chair of the ACP Committee of all candidates who have shown themselves to meet the professional standards required for the NZAP ACP through satisfactory completion of the assessment processes required of them by the ACP Committee.

Council will, at the first reasonable opportunity, vote upon the admission of candidates who are Provisional Members to Full Membership of the Association.

## VI SCHEDULE OF FEES

The current fee schedule for all aspects of the Assessment process is obtainable from the Administrator or from the website: [www.nzap.org.nz](http://www.nzap.org.nz)

## VII ALTERATIONS TO PROCEDURES

Any changes to the NZAP ACP assessment policy and procedures are usually published in the NZAP Newsletter and included on the website. **If your printed copy differs from the copy on the website, defer to the website version.**

# INITIAL SUPERVISOR'S CONTRACT



## INITIAL CONTRACT BETWEEN:

### THE NZAP ADVANCED CLINICAL PRACTICE COMMITTEE

And

#### NAME:

who is undertaking the responsibilities of being a Training Supervisor to

#### NAME:

The following are the requirements and responsibilities that you agree to undertake to ensure your supervisee has optimal conditions for being successful in completing the Advanced Clinical Practice:

1. Provide weekly supervision.
2. Work with the supervisee *after* the candidate enters the ACP pathway, carefully identifying and focusing on a training case to facilitate in-depth reflection from first contact. The training case will be presented for assessment towards the end of the ACP training.
3. Become aware of the clinical standards of the ACP, both the written work and the assessment interview. This will involve participating in either a written work marking conference, as marker or observer, or in being a panelist at an assessment interview. This participation needs to occur before your supervisee submits their written work.
4. Maintain an oversight of your supervisee's development and learning through their reading and taking up of educational opportunities, including their reflections as a therapist within the bi-cultural context of Aotearoa, New Zealand.
5. Regularly discuss your supervisee's progress in a supervision group.
6. Attend specific ACP supervision discussions when available.
7. Report annually on your supervisee's progress in the Annual Supervisor's Report, including attestation of the number of supervision hours during the year.

Agreed:

Signature of supervisor: .....

Date: .....

Signature of Chair, ACP Committee: .....

Date: .....

**FIRST TRAINING CONTRACT BETWEEN AN  
ADVANCED CLINICAL PRACTICE  
CANDIDATE AND THEIR NZAP PRIMARY  
TRAINING SUPERVISOR**



**Training Supervisor: (Name)**

Email

Address

Telephone/s

Registered Psychotherapist:

Yes / No

ACP completed:

Yes / No

**Supervisee: (Name)**

Email

Address

Telephone/s

**1. SUPERVISEE to complete**

**1a.** Current training:

**1b.** Training supervision frequency and hours to date:

Training Supervisor signature:

**1c.** Current and previous clinical contexts:

**1d.** List the principal goals and focus of supervision:

1e. Include any conditions or recommendations from interview panels:

**2. SUPERVISOR, SUPERVISEE and TRAINING SUPERVISORS GROUP CONVENOR to complete**

2a. We have reviewed and discussed the Supervision and Advanced Clinical Practice Policy and Procedures documents on the website at [www.nzap.org.nz](http://www.nzap.org.nz) and we agree to follow the Association's Code of Ethics.

Yes / No

2b. We hereby agree to meet for weekly supervision (**minimum 40hrs annually**) at an agreed fee.

Supervisee signature:

Date:

2c. Primary Training Supervisor (please state scope of practice under the HPCA):

Primary Training Supervisor signature:

Date:

2c. Training Supervisors' Group Convenor signature:

Date:

*Please note the following items to consider in this supervision agreement*

Please send a copy of this contract to Catriona Cairns: [catrionajcairns@gmail.com](mailto:catrionajcairns@gmail.com)

## **FIRST SUPERVISION AGREEMENT (continued)**

When making this agreement, please cover in your discussions the following points:

1. Ensure that the purpose of supervision has been fully explored, and that roles, tasks and expectations have been clarified.
2. Discuss issues regarding record keeping.
3. State the requirement for the supervisee to keep a log of all work done, training courses, seminars, ongoing work, reading, etc., including regular reflection on their growth as a therapist within the bi-cultural context we work within.
4. Be aware of the expectation that the supervisor will report the supervisee's progress regularly to the Training Supervisors' Group.
5. If a grievance should arise between the supervisee and the supervisor, which cannot be resolved within the supervisory relationship, the matter will be mediated by the Training Supervisors' Group or its delegate.
6. Should the supervisee choose, for whatever reason, to change supervisors, this can occur providing there is consultation between the supervisors, or an updated supervision report is given to the second supervisor. Assistance in this matter can be sought from the Training Supervisors' Group.
7. Discuss emergency procedures, including who to contact if the supervisor is unavailable.
8. Agree on working format for supervision sessions.
9. State cancellation policy and supervision fees.
10. Discuss safety agreements for clients, supervisee and others.
11. Make agreements regarding third party involvement, where applicable.
12. Agree on matters of confidentiality.
13. Agree that the candidate will work face-to-face for at least 60% of their clinical hours.

You may wish to use the space below to list some of the above agreements.