

Guidelines for assembling and assessing EBPTP KSA portfolios or evidence for course assessment

This document provides guidance on assembling and assessing core Knowledge, Skills and Attitudes (KSA) Portfolios, and evidence required for course assessment processes.

EBPTP KSA Applicants/Candidates are those who do not have a relevant recognised Core Professional training or qualification, and who must evidence how they meet this prerequisite requirement for Evidence Based Parent Training.

This document is for use by:

- Individuals assembling BABCP EBPTP KSA Portfolios who are applying for EBPTP Provisional Accreditation via the EBPTP KSA route
- Individuals assembling EBPTP KSA Evidence for Assessment during a BABCP Level 2 Accredited Evidence Based Parent Training Course
- BABCP Accreditors and BABCP Level 2 Accredited EBPT Course Selectors/Assessors for assessing an individual's EBPTP KSA evidence

If applicable, please also refer to the Guidelines for Level 2 Accredited Courses Assessing KSA Candidates document, which provides additional information on assessing suitability for KSA candidates for your Level 2 Accredited PG CBP course, including IAPT HI PG Diploma.

Introduction

It is recognised that the core Knowledge, Skills and Attitudes (KSA) expected of an individual as a precursor for undertaking formal courses in Evidence Based Parent Training may be acquired by alternative routes to acquiring a traditional relevant recognised Core Professional qualification or training.

Evidence of meeting the EBPTP KSA criteria can be demonstrated by assembling a Portfolio or Evidence for Course Assessment, which can be made up of formal qualifications, formal and informal training, self-directed study, formal assessment of knowledge, skills and attitudes as demonstrated by course or job entry requirements, work related experience, and references attesting to knowledge, skills, competencies and attitudes.

An individual meeting the relevant recognised Core Professional qualifications or trainings will usually have undertaken a first degree or foundation course, followed by post-graduate level of study. It is therefore reasonable to expect that someone evidencing how they meet the EBPTP KSA criteria should demonstrate equivalent levels of knowledge, skills, attitudes, competencies and experience.

Relevant recognised Core Professional qualifications and trainings are considered to provide the foundation knowledge and skills that underpin all psychotherapeutic or Evidence Based Parent Training work. However, they vary in their attention to all aspects of the EBPTP KSA criteria. How each training would match each criterion would be different if examining Clinical Psychology training, RMN training, or Psychiatry training, for example; if comparing these trainings, some would have strengths in some areas, and less weight in others – although overall these are hefty full-time trainings that often take three to four years to complete.

It is therefore reasonable to assess an EBPTP KSA individual across the whole EBPTP KSA criteria, ensuring that not only is the minimum requirement for each one met, but that overall the training and experience evidenced equates to a considerable training. So an individual with a couple of years working as a Care Assistant may not have enough training and experience, for example, even if they do meet a minimum requirement for each of the EBPTP KSA criteria.

Those assessing EBPTP KSA Portfolios or Evidence for Course Assessment exercise their professional judgement as to whether an individual has the foundation of knowledge, skills, attitudes, competencies and experience that underpin all Evidence Based Parent Training work, and therefore are suitable for further specialist Evidence Based Parent Training study and work.

Responsibility of the EBPTP KSA Applicant/Candidate

The EBPTP KSA Applicant/Candidate is responsible for providing evidence of how they meet the EBPTP KSA criteria, in lieu of a relevant recognised Core Professional training or qualification.

This is a significant piece of work, which should be seen as a useful personal reflection and summary of historical training and experience, which has contributed to acquiring the foundation of knowledge, skills, attitudes, competencies and experience that underpin all Evidence Based Parent Training work, and therefore evidence that they are suitable for further specialist EBPT study and work.

It is worth noting that whilst this might seem to be a substantial task, this provides the Applicant/Candidate with an opportunity to evidence that they are suitably qualified to access training that would otherwise not be available to them in the absence of a relevant recognised Core Professional training or qualification. Were they to have undertaken one of those Core Professional trainings, it is likely that they would have been required to undertake tasks or assignments which would have necessitated work similar or equivalent to assembling the EBPTP KSA Portfolio.

Constructing a Portfolio or Evidence for Course Assessment

From this point forward the word Portfolio is used to describe the BABCP EBPTP KSA Portfolio and the Evidence for Course Assessment material (which is likely to take the form of a Portfolio)

For BABCP EBPTP KSA Provisional Accreditation Applicants - template documents can be downloaded from the Evidence Based Parent Training Accreditation section of the BABCP website, on the left-hand menu headed 'EBPTP KSA'.

For EBPTP KSA candidates on Level 2 Accredited EBPTP courses you should obtain course personalised template documents from your course.

Template documents are designed to be completed electronically in Word, printed, and signed where appropriate. Hand written documents should be avoided where possible.

The form *EBPTP KSA1 - Criterion Checklist* should be placed at the front of the Portfolio, indicating that each criterion has been evidenced individually and appropriately.

The Portfolio should be clearly broken down into the 14 criteria; making use of numbered tabs is advised.

For each of the criterion, complete form *EBPTP KSA2 - Self-statement* (not necessarily required separately if form *EBPTP KSA3 - Countersigned Self-statement* is included as a Reference and attests to all claims made in the self-statement), which should state how the criterion have been met, and what supporting evidence can be found in the Portfolio, and where (either within the criterion section itself or at the back as a cross-referenced document). You might provide more than one Countersigned Self-statement to verify all claims in an overall Self-statement as necessary.

For the Self-statement for each criterion, refer to the 'Reference' requirement (found in the section EBPTP KSA Criteria later in this document).

A Self-statement or Countersigned Self-statement provides the opportunity to make a full summary of the following information:

- How the knowledge, skill and/or attitude was learned and acquired, for example where the training and/or experience was undertaken, through what trainings, in what work settings etc
- Briefly, what knowledge and/or skill was learned or acquired
- A critical appraisal of how this knowledge and/or skill applies to Evidence Based Parent Training Practitioner roles
- Illustrative example(s) of the application of the knowledge and/or skill which demonstrate some critical learning from the outcome

Examples of Self-statements follow at the end of this document and demonstrate the quality of statement expected.

Only include relevant information within the Portfolio, so that is does not become of an unmanageable size. A standard A4 1-2 inch lever-arch file should be sufficiently large enough – if larger than this, it probably contains excessive information.

Please Note: your EBPTP KSA Portfolio is scanned on receipt at BABCP office because its entire passage through the Accreditation process is managed electronically. Therefore please provide your EBPTP KSA documentation:

- In your lever-arch file, hole punched
- Divided by numbered dividers, separators, tabs for each of the criteria
- As a continuous document of A4 pages within each section, preferably single-sided. Do not put documents in plastic wallets or separate folders

Please

- Do not use other dividers/separators/tabs within the sections
- Do not use stick on tabs, labels, or Post-it notes
- Do not staple documents
- Do not use paper clips, or acco-clips
- Instead, please label your documents on the top right corner of the page, and cross-reference within your Portfolio, as instructed
- If necessary hand write any notes on the relevant additional page

Information should be presented in a helpful way, so that Accreditors/Assessors can easily evaluate the information being evidenced, without the need for excessive cross referencing and 'hunting down' the relevant information for each criterion.

However, it is recognised that for multiple criterion, the same evidence will be used repeatedly, for example the certificate of graduation and curriculum for a training course. To ensure that a Portfolio does not become unmanageable in size, it is advised that large documents that are referred to repeatedly are placed at the back and listed on form *EBPTP KSA7 - Document List*, this asks for a label identifier (for example write a large 'A' at the top right corner of the document), the document name, and which criteria number it is being used to evidence.

Certificates and curriculum documents as a whole which are included in this section verify the entire training. However, a copy of the individual page that evidences how it contributes to a criterion being met should be placed in the relevant section of the Portfolio, and the relevant information on the page/s highlighted. For example, the page of the curriculum that specifically refers to the module or course content relevant for the criterion.

Each of the 14 criteria should be evidenced individually and address the criteria individually; for example it is not sufficient to provide a duplicate Reference in several sections which attempts to address several criteria.

For certificates, curriculum, historical records and references etc, please include copies, not original documents, as they cannot be returned

EBPTP KSA Evidence

There are different forms of evidence that can be produced to demonstrate how the 14 EBPTP KSA criteria have been met.

Type A: Training Courses

It is anticipated that most Applicants/Candidates who need to provide a Portfolio will have completed a variety of training courses that will have provided them with the relevant skills and knowledge.

Produce qualifying certification, and course curriculum:

- This includes formal full training courses, induction training and/or in-service short courses as relevant
- Where difficulty arises obtaining historical information, an individual's account of the curriculum countersigned, for example by someone on the course who must give their contact details and relationship to the Applicant/Candidate, is acceptable
- Where certificates are not available, alternative confirmation/evidence of your passing the course is acceptable, for example evidence of registration with a body where the registration would require graduation from a course, or a countersigned statement
- Certificate of attendance alone is insufficient evidence of the content of a training course

Type B: References

There are two methods for providing references which attest to an individual meeting a criterion (except for criterion 11-13, where a Reference completed by a Referee MUST be provided (a Countersigned Self-statement alone is not sufficient).

1. Reference Attesting to Criterion from a Referee

References should come from a variety of sources and should not be provided by a single Referee. Also, it is preferred that the current EBPTP Clinical Supervisor, if applicable, is not relied on heavily to provide References for the EBPTP KSA Portfolio. References might be obtained from people with historical or current knowledge of the Applicant/Candidate. It is preferable that these References come directly from formal course providers, or from employers, or someone responsible for, and attesting to the Applicant/Candidate's knowledge, skills and attitudes:

- The *EBPTP KSA4 Reference* form is provided as a template; this is a Word document which should be completed electronically, printed and signed
- The top section of the form should be completed by the Applicant/Candidate, and should include the Applicant/Candidate's Name, the Criterion Category, and the Criterion Item Number and Name
- The Referee should be provided with this part-completed Word document, and also the *Guidelines for Referees Providing EBPTP KSA References* document, which describes the Reference requirements for each criterion
- 2. Countersigned Self-statement Attesting to Criterion (countersigned by a Referee)

Alternatively, form EBPTP KSA3 – Countersigned Self-statement to attest to acquiring knowledge or skills through a variety of routes, evidence of which might be contained in the Portfolio, can be provided. For the Self-statement for each criterion, refer to the 'Reference' requirement (found in the section EBPTP KSA Criteria later in this document). This should be countersigned by a Referee (countersignatories include employer, tutor, supervisor etc.) stating the professional relationship with the Applicant/Candidate and attesting to and affirming the Self-statement content. It might be relevant to provide more than one Countersigned Self-statement in order to evidence all aspects of the entire Self-statement content.

Type C: Self-Directed Study

A record of self-directed studies, including specific relevant reading, use of audio and video material, interactive teaching media etc. is suitable evidence contributing to meeting some criteria.

Form *EBPTP KSA5 - Self-directed Study Record*, should include information specific to each relevant criteria, and should include the date studied, title, author or publisher, and key learning points.

Type D: Course/Job Admission Criteria

For some criterion, documentary evidence of admission to a course with the admission criteria, or successful appointment to a job with the person specification for that job, is sufficient evidence contributing to meeting a criterion.

These documents should be identified as evidence on the Self-statement or Countersigned Self-statement, including where to find them in the Portfolio (either within the criterion section itself or at the back as a cross-referenced document).

Note: The EBPTP KSA Evidence for Assessment by Level 2 Accredited courses is different to the KSA Portfolio required for BABCP Evidence Based Parent Training Practitioner Provisional Accreditation. This is because BABCP Accreditors make an assessment solely on the paper Portfolio provided as part of an application for EBPTP Provisional Accreditation, whereas a KSA Course Selector has a more intimate knowledge of the individual, and therefore EBPTP KSA Candidates who are training on a Level 2 Accredited course are required to produce less evidence than is required for BABCP EBPTP KSA Provisional Accreditation applications.

Also

For BABCP EBPTP KSA Portfolios - Criterion 14 is a full biography of working history; use form *EBPTP KSA6 - Biography*

For Course EBPTP KSA Evidence for Course Assessment - Criterion 14 is a record of relevant mental health or Evidence Based Parent Training Practitioner clinical experience; use the evidence record document provided by your course provider

EBPTP KSA Criteria

The EBPTP KSA Portfolio or Evidence for Course Assessment is equivalent to 3-4 years of full-time core professional significant training, usually at Graduate or Post Graduate level of study; the EBPTP KSA criteria was developed using this benchmark.

The EBPTP KSA Portfolio overall should demonstrate significant training and experience – and this implies an overall evidencing that goes beyond merely meeting the criteria in a minimal sense.

The individual EBPTP KSA criteria are broken down and explained below.

A Self-statement for each criterion should be provided (except where a Countersigned Self-statement is provided as a Reference and attests to all claims in the Self-statement), as well as the specific evidence requested below.

Applicants, Candidates, Accreditors and Assessors should use the following information as guidance only, exercising professional judgement as to how information and examples are interpreted.

Criterion Category and Criterion Number & Item	Qualification & Quantification	Minimum evidence for Portfolio	Minimum evidence for course assessment
Academic Standing	Applicants are usually required to demonstrate that they have a degree at 2:2 level or above in order to be eligible to apply		Self-statement plus
	using the KSA EBPT		A Training Course/s
	If the applicant does		or B Deference
	not have a degree, they are required to demonstrate that they meet the appropriate academic requirements.		B Reference
KNOWLEDGE		Self-statement	Self-statement
1. Childhood Developmer	nt		
Knowledge of childhood de normal and abnormal child and systemic influence on s	development, attachment	plus	plus
cognitive development		A Training Course/s alone	A Training Course/s
Training Course(s)			or
Acquired through a minimu as part of a coherent delive through several modules (r		or	B Reference
several trainings)		B Reference	
Reference		plus	
Reference attesting to what of the Applicant/Candidate		C Self-directed Study	

about childhood development		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of learning about childhood development		
Self-directed Study		
Evidence of more than one relevant theoretical source, and relevant learning points highlighted		
KNOWLEDGE	Self-statement	Self-statement
2. Health & Social Care Approaches		
Knowledge of the delivery and legislation of health and social care through statutory and non-statutory bodies both national and local	plus	plus
For example:	A Training Course/s alone	A Training Course/s
Mental Health Act/Mental Capacity Act		or
National Services Framework/New Horizons	or	B Reference
NICE Guidelines		
Social care policies	B Reference	
Human rights legislation	plus	
 Data protection, access rights and confidentiality laws 	C Self-directed Study	
• Statutory and non-statutory codes of conduct		
 Variations of available services, for example IAPT, stepped care models 		
Models of service delivery		
Training Course(s)		
Acquired during training, as part of a coherent delivery method, or a stream through several modules, for example through workplace mandatory trainings (might be accumulated over several trainings)		
Reference		
Reference attesting to what evidence the Referee has of the Applicant/Candidate's exposure to and developed awareness of key and current legislation, including at least two illustrative examples of the application of this knowledge		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their exposure to and developed awareness of key and		

current legislation, including at least two illustrative examples of the application of this knowledge		
Self-directed Study		
Evidence of several relevant theoretical sources, and relevant learning points highlighted		
KNOWLEDGE	Self-statement	Self-statement
3. Psychopathology / Diagnostic Skills		
Demonstrate an accurate understanding of psychopathology and problem definitions relevant to parenting work:	plus	plus
For example: Working knowledge of systems of	A Training Course/s alone	A Training Course/s
classification, diagnostic criteria and tools, for example DSM, ICD, diagnostic and symptom report questionnaires (equating to two full days' training). This must include: Conduct Disorder, Oppositional Defiant Disorder, Autism Spectrum Disorder,	or	or B Reference
Attention Deficit Hyperactivity Disorder and	B Reference	
Depression.	plus	
Training Course(s)	C Self-directed Study	
Acquired through a minimum certificate level training, as part of a coherent delivery method, or a stream through several modules, equating to at least three full days of training developing knowledge and skills (might be accumulated over several trainings)		
Reference		
Reference attesting to what evidence the Referee has of the Applicant/Candidate's acquisition of learning about psychopathology, diagnostic criteria and tools, and the proven understanding and application of this knowledge through at least two illustrative examples		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of learning about psychopathology, diagnostic criteria and tools, and the proven understanding and application of this knowledge through at least two illustrative examples		
Self-directed Study		
Evidence of several relevant theoretical sources, and relevant learning points highlighted		
KNOWLEDGE	Self-statement	Self-statement
4. Models of Therapy		
Knowledge of a variety of theoretical models of	plus	plus
	l .	<u> </u>

intervention		
For example: Understanding the historical context	A Training Course/s alone	A Training Course/s
and implications of Social Learning Theory and CBT	A fraining course/s alone	<u> </u>
(equating to three days of academic study) (the 3 day parenting workshops, e.g. IY and Triple P, will not be considered adequate for this). In addition a knowledge of the following approaches	or	or B Reference
	B Reference	
Pharmacological	plus	
Systemic family therapy/practice	C Self-directed Study	
Attachment		
Training Course(s)		
Acquired through at minimum certificate level training, as part of a coherent delivery method, or a stream through several modules, equating to at least three full days of training developing knowledge and skills (might be accumulated over several trainings)		
Reference		
Reference attesting to what evidence the Referee has of the Applicant/Candidate's acquisition of learning about a variety of theoretical models, and the proven understanding and application of this knowledge through at least two illustrative examples		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of learning about a variety of theoretical models, and the proven understanding and application of this knowledge through at least two illustrative examples		
Self-directed Study		
Evidence of several relevant theoretical sources, and relevant learning points highlighted		
Note : Illustrative examples are a mandatory element of the reference, countersigned self-statement, or self-statement. They must provide evidence of basic understanding of the models involved, as well as outlining specifically where knowledge of the models was obtained.		
SKILLS	Self-statement	Self-statement
5. Competency in Key Relationship Skills		
Evidence of proven understanding of the importance of, and competency in the application of key psychotherapeutic relationship skills, such as active	plus	plus
listening, warmth, empathy, trust, and rapport	B Reference	B Reference

building	plus	
Training Course(s)	Minimum x1 other item	
Acquired through a Skills Training Course at	of evidence from	
minimum certificate level training (1 year part-time),	A Training Course/s	
as part of a coherent delivery method, or equivalent length of training as a stream through several	C Self-directed Study	
modules, for example service in-house training such as alcohol services, helping roles using motivational	D Course or Job Admission Criteria	
interviewing, skills development workshops and		
documented specific skills training in supervision (might be accumulated over several trainings and		
roles)		
Reference		
Reference attesting to what evidence the Referee has of the Applicant/Candidate's acquisition of key relationship skills, and the proven understanding and application of the knowledge and skills through at least two illustrative examples		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of key relationship skills, and the proven understanding and application of the knowledge and skills through at least two illustrative examples		
Self-directed Study		
Evidence of several relevant theoretical sources, and relevant learning points highlighted		
Course or Job Admission Criteria		
Documented evidence of course entry criteria or job admission criteria, such as person specification, for courses and job roles that the Applicant/Candidate has undertaken		
SKILLS	Self-statement	Self-statement
6. Maintain & Manage Records and Reports		
Evidence of the acquisition of skills for maintaining and managing formal and informal records and reports and other professional documents, and	plus	plus
understanding and skills necessary to comply with	B Reference	B Reference
legislative guidance, for example data protection and freedom of information matters	plus	
Training Course(s)	Minimum x1 other item of evidence from	
Acquired through formal training, as part of a	A Training Course/s	
coherent delivery method, or informal training as a stream through several modules, or learning for	C Self-directed Study	
example service in-house and on the job training		

(might be accumulated over several trainings and roles)	D Course or Job Admission Criteria	
	Admission Criteria	
Reference		
Reference attesting to what evidence the Referee has of the Applicant/Candidate's acquisition of skills for maintaining and managing formal and informal records and reports and other professional documents, and understanding necessary to comply with legislative guidance. Also attest to the Applicant/Candidate's proven understanding and application of the knowledge and skills through at least two illustrative examples		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of skills for maintaining and managing formal and informal records and reports and other professional documents, and understanding necessary to comply with legislative guidance. Also attest to their proven understanding and application of the knowledge and skills through at least two illustrative examples		
Self-directed Study		
Evidence of several theoretical sources, and relevant learning points highlighted		
Course or Job Admission Criteria		
Documented evidence of course entry criteria or job admission criteria, such as person specification, for courses and job roles that the Applicant/Candidate has undertaken		
SKILLS	Self-statement	Self-statement
7. Communication with Services & Colleagues		
Ability to maintain effective and appropriate communications with internal and external interested parties, including other professionals at all levels, and	plus	plus
non-professionals	B Reference	B Reference
For example:	plus	
 Ability to communicate both orally and in writing making adjustments to suit target audience, for example speaking without 'jargon' to non-professionals 	Minimum x1 other item of evidence from A Training Course/s	
 Ability to use common language when dealing with other professionals 	C Self-directed Study D Course or Job	
Ability to maintain focus on relevant areas of	Admission Criteria	

interest so as to facilitate processes helpfully		
Training Course(s)		
Acquired through formal training, as part of a coherent delivery method, or informal training as a stream through several modules, or learning for example through service in-house and on the job training (might be accumulated over several trainings and roles)		
Reference		
Reference attesting to what evidence the Referee has of the Applicant/Candidate's ability to communicate effectively at all levels, with internal and external parties, to maintain focus on relevant areas of interest so as to facilitate processes helpfully, demonstrated by at least two illustrative examples		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their ability to communicate effectively at all levels, with internal and external parties, to maintain focus on relevant areas of interest so as to facilitate processes helpfully, demonstrated by at least two illustrative examples		
Self-directed Study		
Evidence of several relevant theoretical sources, and relevant learning points highlighted		
Course or Job Admission Criteria		
Documented evidence of course entry criteria or job admission criteria, such as person specification, for courses and job roles that the Applicant/Candidate has undertaken		
SKILLS	Self-statement	Self-statement
8. Awareness of Risk		
Demonstrate a high level of awareness of potential risks to and from clients, based on an ability to assess the probability of self-harm, suicide, hostility, neglect, violence, exploitation, and of child protection and vulnerable adult issues, with a commensurate knowledge of their responsibility to respond to these	plus A Training Course/s plus	plus A Training Course/s plus
Training Course(s)	B Reference	B Reference
Acquired through formal training, as part of a coherent delivery method, or informal training as a stream through several modules, or learning for example through structured service in-house and on the job training equating to at least three full days of		

training developing knowledge and skills across the different risk areas (might be accumulated over several trainings and roles) Reference Reference attesting to what evidence the Referee has		
of the Applicant/Candidate's acquisition of knowledge of potential risks to and from clients, and of child protection and vulnerable adult issues, demonstrating a commensurate knowledge of the Applicant/Candidate's responsibility to respond to these, by providing at least two illustrative examples		
or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of knowledge of potential risks to and from clients, and of child protection and vulnerable adult issues, demonstrating a commensurate knowledge of their responsibility to respond to these, by providing at least two illustrative examples.		
SKILLS	Self-statement	Self-statement
9. Comprehension of Research		
Demonstrate critical skills in reading, analysing and discussing published research studies, understanding of the implications of research and its application in the development of knowledge and practice in	plus A Training Course/s	plus A Training Course/s
helping and psychotherapeutic roles	plus	plus
Training Course(s)	B Reference	B Reference
Acquired through at minimum under graduate level formal training, as part of a coherent delivery method, of at least one research module or as a stream through several modules, or equivalent informal learning for example through structured service in- house and on the job training (might be accumulated over several trainings and roles)		
For example:		
• Direct experience of carrying out a short piece of research including critical literature review		
• Practical experience of accessing relevant information from a research base and integrating into practice, for example Support Worker researching the implication of financial debt on low income families as part of a service development project		
Reference		

knowledge and practice, and critical skills in reading, analysing and discussing published research studies. Also attest to their proven understanding of and involvement with the application of the knowledge and skills through an illustrative example. SKILLS 10. Commitment to Ethical Principles Practice in an ethically appropriate manner through interpersonal, professional and academic relationships with clients and colleagues, for example in respect of laws, rights, legislation, honesty and integrity, confidentiality, dignity, equality and diversity, fairness and respect, exploitation, boundaries etc. Training Course(s) Acquired through at minimum certificate level formal	Self-statement plus A Training Course/s plus B Reference	Self-statement plus A Training Course/s plus B Reference
training, as part of a coherent delivery method, or as a stream through several trainings, equating to at least three full days of training developing knowledge		
a stream through several trainings, equating to at		

or		
Countersigned self-statement by the Applicant/Candidate attesting to evidence of their acquisition of knowledge of ethically appropriate conduct, and their proven understanding of and skill in the application of this knowledge by providing at least two illustrative examples of successfully working through ethical dilemmas		
Note : Illustrative examples are a mandatory element of the reference, countersigned self-statement, or self-statement. They should provide clear evidence of working through ethical dilemmas drawn directly from clinical experience.		
Useful reading:		
Bloch, S. & Green, S. 2009. Psychiatric Ethics. Oxford: Oxford University Press		
Hope, T., 2010. Ethics. In: Mueller, M., Kennerley, H., McManus, F., Westbrook, D., eds. The Oxford Guide to Surviving as a CBT Therapist. Oxford: Oxford University Press		
Seedhouse. D., 2008. Ethics: The Heart of Healthcare 3rd edition. Chichester: Wiley		
Thompson, M., 2010. Understand Ethics: Teach Yourself. London: Hodder		
ATTITUDES	Self-statement	Self-statement
11. Fitness to Practice and Suitable at a Personal Level		
Evidence of personal suitability to working in a helping role	plus	plus
Reference	B Reference (provided by	B Reference (provided by
Reference attesting to what evidence the Referee has of the Applicant/Candidate's fitness to practice and suitability to be working in a helping role, including for example CRB checks completed, no criminal convictions or professional judgements against them that would exclude them from working in a professional capacity, a statement that the Applicant/Candidate has a reasonable standing within the professional community, with this clearly	a Referee, not a Countersigned Self- statement)	a Referee, not a Countersigned Self- statement)
evidenced by giving illustrative examples that the Applicant/Candidate is able to appropriately form, maintain and end helping relationships, in a way which holds to appropriate professional boundaries		

Applicant/Candidate –		
 is able to practise as an autonomous professional, exercising their own professional judgement, 		
 is able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem, 		
 is able to initiate resolution of problems and is able to exercise personal initiative, 		
 knows the limits of their practice and when to seek advice or refer to another professional, 		
 recognises that they are personally responsible for and must be able to justify their decisions 		
It is strongly recommended that in demonstrating the above the Applicant/Candidate draws directly on reflective diary and/or other records of practice – utilising these to construct a reflective statement that concludes with a description of their contemporary practice and how they have maintained fitness to practice as an appropriate person.		
ATTITUDES	Self-statement	Self-statement
12. Self-evaluation and Reflection		
Capacity to reflect on and evaluate own values, priorities etc.	plus	plus
Reference	B Reference (provided by	B Reference (provided by
Reference attesting to what evidence the Referee has that the Applicant/Candidate exercises self-reflective capacity within their work, giving consideration to their awareness of their own values and internal processes, significance of prejudices, impact on others, personal skills and attributes and their limiting impact where appropriate, evidenced by giving at least two illustrative examples of the Applicant/Candidate acting in a self-reflective way, or with self-awareness, in their work	a Referee, not a Countersigned Self- statement)	a Referee, not a Countersigned Self- statement)
ATTITUDES	Self-statement	Self-statement
 13. Has Enquiring Mind and is Receptive to Scientist Practitioner Approach Receptive to scientist practitioner approach and empiricism, including identifying problems and 	plus	plus
finding and applying evidence-based solutions Reference	B Reference (provided by a Referee, not a Countersigned Self-	B Reference (provided by a Referee, not a Countersigned Self-

Reference attesting to what evidence the Referee has that within the Applicant/Candidate's practice they demonstrate curiosity and a spirit of enquiry in collaborative working which has emphasis on an evidence-based approach to both identifying problems and finding and applying solutions to them, not only terms of drawing from evidence-bases commonly used within mental health, but their ongoing involvement in, and contribution to, the	statement)	statement)
development of the evidence-base with other practitioners and professionals, evidenced by at least two illustrative examples.		
ADDITIONAL SUPPORTING INFORMATION	Biography	Clinical Experience
14. Biography or Clinical Experience Record		Record
Evidence of relevant work history / experience, and training		



EBPTP KSA1 – Criterion Checklist - EXAMPLE

Applicant Name

Criterion Category	Criterion Item	Evidence	Complete & Evidenced
	1. Child Development	A Training Course/s <i>alone</i> <u>or</u> B Reference <u>plus</u> C Self-directed Study	Self-statement A B C
KNOWLEDGE - K	2. Health & Social Care Approaches	A Training Course/s <i>alone</i> <u>or</u> B Reference <u>plus</u> C Self-directed Study	Self-statement A B C
KNOWL	3. Psychopathology / Diagnostic Skills	A Training Course/s <i>alone</i> <u>or</u> B Reference <u>plus</u> C Self-directed Study	Self-statement A B C
	4. Models of Therapy	A Training Course/s <i>alone</i> <u>or</u> B Reference <u>plus</u> C Self-directed Study	Self-statement A B C
S - STITIS	5. Competency in Key Relationship Skills	 B Reference <u>plus</u> Minimum x1 other item of evidence from A Training Course/s C Self-directed Study D Course or Job Admission Criteria 	Self-statement A B C D

Check the boxes to indicate which evidence is included for each criteria

[1	
S - STIINS	6. Maintain & Manage Records and Reports	 B Reference <u>plus</u> Minimum x1 other item of evidence from A Training Course/s C Self-directed Study D Course or Job Admission Criteria 	Self-statement A A B C C D D D
	7. Communication with Services & Colleagues	 B Reference <u>plus</u> Minimum x1 other item of evidence from A Training Course/s C Self-directed Study D Course or Job Admission Criteria 	Self-statement A B C D
	8. Awareness of Risk	A Training Course/s <u>plus</u> B Reference	Self-statement A B
	9. Comprehension of Research	A Training Course/s <u>plus</u> B Reference	Self-statement A B
	10. Commitment to Ethical Principles	A Training Course/s <u>plus</u> B Reference	Self-statement A B
A	11. Fitness to Practice and Suitable at a Personal Level	B Reference (provided by a Referee, not a countersigned self-statement)	Self-statement B
ATTITUDES - A	12. Self Evaluation and Reflection	B Reference (provided by a Referee, not a countersigned self-statement)	Self-statement B
AT	13. Has Enquiring Mind and is Receptive to Scientist Practitioner Approach	B Reference (provided by a Referee, not a countersigned self-statement)	Self-statement B

14.		
Biography or Clinical Experience	Biography	Bio 🗌
Record		

Applicant Signature	



EBPTP KSA2 – Self-statement - EXAMPLE

Applicant/Candidate Name	Mark Peters
KSA Criterion Category	Knowledge
Criterion Item Number & Name	1. Childhood Development

Applicant/Candidate Self-statement Attesting to Criterion

I grew up among a family of teachers - both Primary and Secondary - and had an interest in human development from relatively early on in life. The first in-depth piece of work I completed on the subject was a Child Development project, undertaken while working towards AS level English in 2005.

I continued to develop my awareness of childhood development on the Foundation Diploma course (2007-8), when I studied the approaches of various schools of thought on Personality Development - from infancy to adulthood - including the Humanistic (Person-centred) perspective and overviews of both the Psychodynamic and Behavioural theoretical stances.

Whilst studying towards my BSc in Childcare Studies (2009-2012), a core module covering attachment theory and developmental approaches was undertaken in year two. The module introduced the concept of human development from a neo-natal perspective, across childhood and adolescence, the premise is that differing variables affect different people in different ways at certain stages in development; not only seen as a biological process, but as a psychological process occurring on a continuum. Knowledge was assessed by a 2,000 word course assessment, a Q methodology report of attitudes and behaviours, in addition to an end of course unseen exam (results attached to this section).

More recently the Introduction to Cognitive Behavioural Therapy course (6-days in-house) I attended in 2013 outlined theory of cognitive development from early childhood onwards, as a basis for understanding presenting problems. I also learned about young people's issues relating to CBT: we debated young people's suitability for CBT and discussed tailoring self-help and psycho-educational materials for children and adolescents. Finally, we addressed formulation for young people, service provision for clients aged 16-18 and Adult Mental Health service provision.

I have also acquired knowledge through my working roles and placements by means of undertaking the training in, and subsequent conducting of varying risk assessment tools. I have received awareness training in the OASys risk management tool, full training in the Historical, Clinical and Risk (HCR20) tool, the Violence Risk Scale (VRS), the Static 99, RM2000 risk assessments. The Structured Assessment of Risk and Treatment Need (SARN). All of these tools consider developments throughout an individual's life, from early development, such as family background, educational history, relationship developments, mental illness, and personality development.

Throughout my employment with HM Prison Service at NAMED Young Offenders Unit, I was required

to complete in-depth and extensive life formulations and conducted in excess of 20 initial assessments with Young Offenders. I was also significantly involved in the delivery of a number of treatment programmes including Creative Thinking, Problem Solving, Psycho-education and Psychodrama sessions; all of which involved the need to acquire in-depth details surrounding the individuals life, from birth to the present, via means of self disclosures, collateral evidence, time lines, and life maps.

Application of knowledge

In my current role working at a Family Support Worker at NAMED CHARITY, I am also required to conduct initial assessments with young people and their families, which require an in-depth consideration of their early development, onset of mental health difficulties and current presentation. This knowledge has informed my practice as I am aware of the numerous factors influencing child development on an individual, interpersonal and inter-relational level. I undertake assessment of children and young people utilising a biopsychosocial approach, primarily assessing behavioural problems and collaboratively agreeing goals and interventions. This includes completing a history in terms of past and current issues which may be contributing to current mental health problems and behavioural difficulties.

For example, I have recently assessed a young teenager, who disclosed she had always felt less important than the rest of her siblings, from early childhood. By obtaining this information we were able to discuss her beliefs and assumptions in relation to her current relationships with her family and peers and the impact that these have on her aggressive behaviour.

Evidence Attached

Foundation Diploma Course - relevant module in this section

BSc Childcare Studies- relevant module in this section

Certificate CBT - relevant module in this section & teaching slides

Job descriptions (appendices)

Applicant/Candidate Signature	Mark Peters
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EBPTP KSA2 – Self-statement - EXAMPLE

Applicant/Candidate Name	Karen Jones
KSA Criterion Category	Attitudes
Criterion Item Number & Name	12. Self-evaluation

Applicant/Candidate Self-statement Attesting to Criterion

I have developed a high level of self-reflection, acquired through various trainings and also through interactions with trainers, colleagues, supervisors, and clients. Specifically with clients I am aware of my own values and beliefs, especially in relation to implicit attitudes that may be transmitted non-verbally.

During my BSc Child Psychology research modules (2005-7), we were taught the importance of removing researcher bias from the outcome of a study, and this helped me to reflect on how, in the same way as a therapist I need to attempt to remove personal bias and past experience when communicating with a client who may have a similar experience to my own. During my training and work as a Psychology Assistant (2012-15), there was always an emphasis on ensuring that clients' attitudes were respected, despite personal bias, and that having self-awareness of my own attitudes, beliefs, values and experiences and how they might impact on my interaction with another person was paramount.

My most significant learning occurred as part of my 1 year Counselling Skills Certificate (2009), when I was required to complete a personal reflective journal. People learn experientially, and by keeping a record of reflections and evaluations, we are able to observe our weaknesses and strengths and make progress accordingly. It is important to think about experiences in practice, viewing them as opportunities for learning, in order to lead to better understanding of a situation. I was able to reflect on my responses to different clients and colleagues, and recognise how my own values in particular could impact on my relationships. I recognise the importance of having an honest relationship with myself in order to stay aware of my internal processes. Often, we may be too close to a situation to see it objectively therefore a third party view is often beneficial. I have increasingly found Clinical Supervision a useful place to continue to develop self-awareness and undertake self-reflection.

I find that developing self-awareness and being able to self-reflect is an ongoing process, and I learn more all the time.

Illustrative examples of exercising self-reflective capacity, or with self-awareness:

During my work as a Psychology Assistant, I assessed a parent of a young child with ADHD and challenging behaviour. She commented repeatedly during the initial assessment session, and even made a point of calling me later after the session, to say that she had for the first time in her life felt she had connected with someone (me), and indicated that she was particularly keen to continue contact with me, and not be referred to another member of the team. I had made use of self-

disclosure in the assessment, briefly explaining that I had experienced something similar to her as a parent myself and therefore could empathise, which I later reflected on in Supervision as an error of judgement, because although it was helpful to normalise for this client, it also bound us in an unhelpful way. Because I felt responsible for this, I also decided to do individual work with the parent and child, when she was much better suited to group work, and again I explored this in Supervision a couple of months later and eventually referred her to a group we were running in the service.

In an assessment, I found difficulty in engaging with a father who demonstrated harsh parenting including use of smacking. I found myself becoming very judgmental, due to my previous experience working with children who had experienced abuse. I quickly realised this was going to be a challenge, and took the case to supervision. With support I was able to look more objectively at the situation, and place my focus on formulating with the father why he was so harsh towards his chilren and where his attitudes to being a parent came from. In this case a bad relationship with his own parents made him feel that children should be 'seen and not heard', and we were able to work together in a collaborative manner towards a change in beliefs and behaviour. Being objective did change my attitude towards this client considerably.

Evidence Attached

Reference from Helen French, Clinical Supervisor between April 2012 and April 2015

Applicant/Candidate Signature	Karen Jones



EBPTP KSA3 – Countersigned Self-statement - EXAMPLE

Applicant/Candidate Name	Sheila Jacobson
KSA Criterion Category	Knowledge
Criterion Item Number & Name	4. Models of Therapy

Applicant/Candidate Self-statement Attesting to Criterion

Acquisition of learning about a variety of theoretical models:

During my BSc in Psychology in 2006-9, one module was dedicated to learning about behavioural theory. We examined the different theories including classical conditioning, operant conditioning and social learning theory. We were required to complete an assignment which compared and contrasted these theories. In addition, we also had teaching on child development and the role of attachment.

I have also completed a Postgraduate diploma in Child Health (2009-2010) where one module was dedicated to learning about the different approaches to understanding child mental health including CBT, behavioural theories, systemic approaches and attachment theory. I was required to complete a 5,000 word essay on the theoretical underpinnings of emotional and behavioural difficulties in children and young people.

During my work as a Psychology Assistant, 2011-2014, I undertook in-house workshops which were aimed at informing about the different counselling services available with our service, including presentations from the CBT service, and the Specialist Family Service, who presented on systemic therapy. During this period I also attended a 1 day in-house workshop on Pharmacotherapy, and undertook additional reading on the subject (see attached self-directed study record).

During this time I also undertook an 8-day foundation / introduction training in CBT; modules covering cognitive and behavioural theories, fundamentals of CBT, working with depression, anxiety and panic, and social anxiety.

I also shadowed two Social Workers for one week each, sitting in on assessment and systemic and family therapy sessions. In addition I have read about systemic and family approaches to therapy (see attached self-directed study record).

I have learned to appreciate the significant and subtle differences between different theoretical approaches, and which therapies have evidence for being more effective for different client groups or presentations. For the last 8 months I have been working with the NAMED CHILDRENS SERVICE where assessments are made by the team and clients are allocated across a stepped-care service, either to a group based parent training intervention or guided self-help for anxiety and depression or to a more intensive one-to-one therapy, for example CBT for young people with depression and self-harm.

Illustrative examples of the application of this knowledge:

During my work as a Psychology Assistant, I assessed a young person who presented with social anxiety and seemed suitable for a CBT approach. Very soon as the therapy progressed, it became clear that there were

significant long term issues relating to social communication and learning difficulties. I discussed these issues with the client and their family and we agreed that it would be helpful to have an in-depth assessment for Autism Spectrum Disorder and learning difficulties. The client was referred to a Clinical Psychologist with expertise in this area, with the option to return to complete the CBT approach to dealing with the anxiety problems later if necessary.

I recently assessed a child whose parent who was depressed following a miscarriage. I felt this parent required a supporting environment, in addition to support for the child who was experiencing low mood and behavioural difficulties. The parent agreed that a referral to the Bereavement Counselling Service would be appropriate.

Evidence Attached

Certificate and curriculum for BSc in Psychology – in appendices at end of portfolio, labelled C;

Certificate and curriculum for Postgraduate certificate in child health – in appendices at end of portfolio, labelled D;

Statement from Clinical Supervisor, Paul Smith, attesting to attending in-house training during Gateway role – in this section

Applicant/Candidate Signature

SP Jacobson

Referee Attesting to Self-statement

Name	Paul Smith
Position	Clinical Manager, Named Child and Adolescent Mental Health Services
Email	
Telephone	

Professional Relationship to Applicant/Candidate
I was Sheila's Clinical Supervisor whilst she worked as an Assistant Psychologist in the NAMED CAMHS service between September 2011-September 2014.

Referee Signature	Paul Smith
Referee Signature	Paul Smith

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EBPTP KSA4 – Reference - EXAMPLE

Applicant/Candidate Name	Sally Peterson
KSA Criterion Category	Skills
Criterion Item Number & Name	9. Comprehension of Research
Referee Name	Harry Smith
Position	Named CAMHS
Email Address	
Telephone	
Professional Relationship to Applicant/Candidate	I was Sally's direct Line Manager from 2013 to January 2015 when she was employed in our CAMHS service as a Psychology Assistant. We were both members of the same peer supervision group for two years during that period. We remain in contact as colleagues working in the same Trust.

Reference Attesting to Criterion

Please refer to the *Guidelines for Referees Providing EBPTP KSA References* document for specific information required for your Reference; the Applicant/Candidate should provide this to you.

References should be provided to the Applicant/Candidate.

Sally was employed as a Psychology Assistant following graduation from her BSc in Childcare Studies, where she had undertaken relevant research projects - evidence of specific qualifications and relevant training modules were verified prior to employment. During her employment with us, Sally additionally received in-house training in research skills and statistical analysis, including SPSS training.

Sally was involved in the service's restructuring programme, which redefined the clinical pathway for children presenting with behavioural difficulties. The new pathway has been set up to cater for children presenting with conduct disorder and ADHD.

Part of this project required analysis of the existing services in terms of client numbers and populations, sources of and processes for referral, service resources including administrative staff, clinical professionals, and physical working locations and resources, and costs and budgets. Sally played a large role in this analysis, which involved liaison with all existing services and many employees, reference to relevant research articles on service delivery

projects, and attendance at, and presentation of information at regular review meetings involving senior management.

Sally developed and demonstrated a high level of understanding of research material and its application within the project, for example tracking down and citing a similar project undertaken by X Trust, and an ability to translate information into meaningful language for its recipients.

Sally's contribution to the project was invaluable and demonstrated an ethical approach.

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EBPTP KSA5 – Self-directed Study Record - EXAMPLE

Applicant/Candidate Name	
KSA Criterion Category	
Criterion Item Number & Name	

Date studied	Title	Author	Key learning points

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EBPTP KSA6 – Biography - EXAMPLE

Applicant/Candidate Name Jake Smith

Biography of working life to date (approximately 500-700 words)

• See Biography Sample document

In 2011 I completed my undergraduate degree in paediatric nursing. This equipped me with specific theoretical knowledge to meet criterion 1,2,3,4, 8 and 9 which is detailed in my application form. I then worked full time for two years (2011 - 2013) as a nursing assistant at NAME hospital. During this time I gained experience of working with children and young people who also had psychological difficulties such as anxiety, depression and behavioural problems.

During this time I participated in Trust in-service training programmes relating to statutory policy which is detailed in DOCUMENT B in my Portfolio relating to criterion 2,6,8 and 10.

I also participated in the ward staff development programme on a monthly basis, which involved presentations on a range of topics such as policy updates; use of new medications; and record keeping;

Working as a nursing assistant enabled me to develop skills in recognising the signs and symptoms of a range of mental health problems and how these impact on the day to day functioning of young people and their carers. This also enabled me to gain the necessary interpersonal and communication skills to interact therapeutically with service users experiencing an episode of acute mental illness. During this time I was also exposed to knowledge regarding the ethical administration of the Mental Health Act and medication. I have provided a reference from Mrs J who was a staff nurse on the same ward and who acted in a supervisory role during this time. This experience provides evidence to support criterion 5,6 and 7.

Between 2013-2014 I worked part time (3-5 days per week) as a nursing assistant in the community within the same hospital trust. I kept up to date with statutory regulations. During this time, outside of work, I completed a MSc in Child Mental Health at X university. This equipped me with theoretical knowledge in the areas identified in DOCUMENT C in my Portfolio. The curriculum for this course is enclosed, as is a reference from my research supervisor for my research dissertation. This experience contributes towards criterion 1,2,3,4 and 9. Also at this time I worked on a voluntary basis for the Child Line and undertook their training programme for working on their telephone helpline. The content of this training and the supervised practice component is detailed in DOCUMENT D of my application. This experience contributes toward criterion 10,11,12 and 13.

In 2013 I undertook an in-service training programme of 10 1/2 day sessions in basic cognitive-behavioural skills. This involved skills development and 1 hour of group clinical supervision per week. It was at this time I began reading CBT related literature and joined the BABCP and attended local BABCP activities. These are detailed in DOCUMENT E of my Portfolio.

During this time my clinical work was supervised by Ms W who has written a reference supporting my application for accreditation. In 2015 I secured a full-time position as a mental health worker in NAMED CHILDREN CENTRE with a remit of delivering parenting interventions for parents of children with behavioural

problems.

Since completing my MSc I have continued to participate in CPD activities, the detail of which for the last 3 years is outlined in DOCUMENT G. I continued to be employed as a mental health worker in a local children's centre working to consolidate my clinical knowledge and skills and participate in monthly individual clinical supervision, which uses audio tapes as a basis for skills development. A reference from my current supervisor is enclosed.

Applicant/Candidate Signature	Jake Smith

British Association for Behavioural & Cognitive Psychotherapies



EBPTP KSA7 – Document List - EXAMPLE

Applicant/Candidate Name

List of documents referenced in Portfolio or Evidence for Course Selection

(Provide copies only, not originals)

Label identifier	Document name	Criterion numbers
A	Certificate and Curriculum, Masters in Child Mental Health, Named University, 2003-5	1, 3, 4 & 9
В	Mandatory in-house Training Records, Employer Name, 2011-14	6, 8