

REVISED SENIOR ACCREDITED SNCPS (Acc.) category

**GUIDANCE FOR :
CURRENT SENIOR ACCREDITED REGISTRANTS SNCPS (Acc.)**

**THIS GUIDANCE IS FOR APPLICANTS WHO HAVE A LEVEL 7 OR
EQUIVALENT COUNSELLING OR PSYCHOTHERAPY
QUALIFICATION**



Application Guidance during the SCoPEd transition period for applicants who hold Accredited Professional Registrant (PNCPS Acc.) membership and a Level 7 or equivalent counselling or psychotherapy qualification.

This category of Registrant is an option for members who wish to demonstrate advanced competence in counselling practice above and beyond the requirements for our Accredited Professional Registrant (PNCPS Acc.) membership category.

Before you attempt to submit your application, please read the following guidance carefully. If you do not submit the specific information required as per this guidance your application may be delayed or returned for further clarification.

ELIGIBILITY CRITERIA AND GUIDANCE

The category of Senior Accredited Registrant (SNCPs Acc.) is an option for members who:

1. Hold Accredited Professional Registrant (PNCPS Acc.) membership with NCPS as a counsellor or psychotherapist and who are currently in practice.

We can also accept equivalent membership with other recognised Accredited Registers including:

- BACP Senior Accredited (if gained post February 2024)
- BPC Psychotherapist
- UKCP Psychotherapist

2. Hold a Level 7 or equivalent counselling or psychotherapy qualification.

This may be a qualification from the training you submitted as part of your application for Accredited Professional Registrant (PNCPS Acc.) membership, or you may have completed subsequent or additional training at level 7 (or equivalent).

Level 7 (or equivalent) counselling or psychotherapy supervision training that included both theory and practice is also eligible.

Level 7 qualifications may include Ofqual / FHEQ:

- Masters-level qualifications (MA / MSc)
- Post-Graduate Certificates (PG Cert.)
- Post-Graduate Diplomas (PG Dip.)

For Scotland:

- Level 11 qualifications on the SCQF.

3. Have accumulated a minimum of 500 Tutor Contact hours (GLH) hours of training in counselling or psychotherapy. (A minimum of 450 of which have already been verified in line with PNCPS Acc. requirements.)

4. Have experienced a minimum of 160 hours of personal therapy and / or personal development work relevant to practice.

Personal therapy and / or personal development work

All applicants must provide evidence of a minimum of 160 hours of personal therapy and / or personal development work relevant to practice.

These hours can be counted from the start of your training.

'Personal development work' can include any activities that you have undertaken where you specifically intended to experience personal development / self-awareness relevant to practice. It differs from CPD in that it focuses on personal development and self-awareness rather than specifically professional development. Personal development work can take many forms, including:

Individual personal therapy; group therapy; experiential groups; personal development groups and psycho-educational activities – this list is not exhaustive. Assessors will need to see how the activities you include are explicitly relevant to clinical practice.

Supervision, whether individual or in groups, cannot be used to meet this requirement.

CPD can only be used if it clearly contained a personal, as well as professional, development aspect and has been applied to the applicant's clinical practice.

Please show the approximate **dates** over which the personal therapy and / or personal development work took place using the [Professional Development Log](#).

Please also submit evidence in the form of a **brief written statement of a total of 500 words (max)** containing a description of how this work contributed to your self-awareness (250 words max) and how this was applied to their clinical work overall (250 words max).

5. Personal written statement.

All Applicants must also provide a **written statement of a total of 3250 words (max)**

Applications MUST use the subheadings shown below.

Applications which do not use this layout will be returned.

Section 1 Work-based experiences (500 words max)

Section 2 Psychopathology and risk (1000 words MAX)

Section 3 Discriminatory practices and management of therapeutic ruptures (1000 words max)

Section 4 Audit and evaluation (250 words max)

Section 5 Reflexivity and self-awareness (500 words max)

Section 1 Work-based experiences (500 words max)

For this section, applicants need to provide:

A summary of a piece of counselling or psychotherapy-related experience that involved taking an active role in the applicant's professional community.

It is acceptable for this experience to have been gained locally or nationally. This should demonstrate your ability to communicate effectively with other professionals in sharing information, advice, instruction or professional opinion. Having a letter, article or paper published would be a good example.

The relevant [SCoPEd Column C Competence](#) is listed below:

Professional framework

1.13.C Ability to take an active role within the professional community locally and nationally. Be able to communicate effectively with other professionals in sharing information, advice, instruction and professional opinion.

Section 2 Psychopathology and risk (1000 words MAX)

For this section, applicants need to provide:

A summary of experience gained in training, practice and / or CPD to evidence:

- Competence in conceptualising and / or formulating ways of working with clients with chronic and / or enduring mental health conditions.
- Understanding of the language and discourses around diagnosis, psychopathology and mental disorders.
- The ability to make complex judgements about high-risk clients and take appropriate action when required.

This experience could have been gained via:

- Training – if so, please include evidence of the relevant course(s) / qualification(s) and successful completion thereof.
- Practice – if so, please include a description of the clinical work involved and specify by whom it was supervised.
- CPD – if so, please include evidence of the relevant courses and successful completion thereof.

Experience gained from working in a team is acceptable in addition to your own individual practice. Our assessors are aware that some applicants will not subscribe to a medical model. They will be looking for an understanding of the language commonly used about mental health and psychopathology around these issues and an ability to support clients who may have received a diagnosis and / or mental health treatment. They will also look for an ability to manage the complex professional and ethical judgements that can arise in this area, and to assess the risks that may be involved.

The relevant SCoPED Column C Competences are listed below:

Assessment

2.1.C Ability to conceptualise and (or) formulate ways of working with clients or patients with chronic and enduring mental health conditions.

2.5.C Ability to understand the language and discourses around diagnosis, psychopathology and mental disorders.

2.8.C Ability to make complex judgments about ongoing work with high-risk clients or patients and take appropriate action as needed.

Section 3 Discriminatory practices and management of therapeutic ruptures (1000 words max)

For this section, applicants need to provide:

- 1.A statement showing understanding of the harm caused by discriminatory practices, and of how to address power differentials in therapeutic practice.

An example from the applicant's own clinical experience is likely to be valuable here.

2. A brief case vignette showing competence in working with ruptures or difficulties within the therapeutic relationship using 'unconscious' or 'out of awareness' processes.

The assessors are aware that different theoretical approaches will view this subject in somewhat different ways. What is important is that applicants show an ability to understand and manage a rupture or difficulty whose cause was not immediately obvious.

Relevant SCoPEd Column C Competences are listed below:

Therapeutic relationship

3.10.C Ability to communicate about the harm caused by discriminatory practices and aim to reduce insensitivity to power differentials within therapeutic service provision, training and supervisory contexts.

3.21.C Ability to work therapeutically with ruptures or difficulties within the therapeutic relationship using awareness of and skills associated with 'unconscious' or 'out of awareness' processing.

Section 4 Audit and evaluation (250 words max)

For this section, applicants need to provide:

A brief statement demonstrating knowledge of, and ability to use audit and evaluation methodologies to contribute to improving the process and outcomes of therapy.

Example of relevant methodologies include:

- Outcome tools such as CORE-10
- Process Tools such as SRS
- Demographic / Service Audit Tools such as the CORE Assessment form

Alternatively, some practitioners use structured review sessions in which particular questions are explored with the client.

The key is to focus on what you do in your work that relates to evaluating how effective it is, and why this is important for you and for the client.

Relevant SCoPEd Column C Competence is listed below:

Knowledge and skills

4.15.C Ability to utilise audit and evaluation methodologies to contribute to improving the process and outcomes of therapy.

Section 5 Reflexivity and self-awareness (500 words max)

For this Section, applicants need to provide:

Case material showing capacity for reflexivity and self-awareness, including evidence of active use of the self when working at depth in the therapeutic relationship and process.

A brief case vignette describing work with a specific client is what is required here. Assessors are seeking to understand how you make use of your own reactions and responses to a client to make choices about how you work with them and to understand how effective the therapeutic experience you are offering is in deepening or enhancing the therapeutic process.

This could describe, for example, the use of advanced empathy and / or immediacy, mutuality and vulnerability, self-disclosure, working at relational depth or the use of countertransference.

Relevant SCoPEd Column C Competence is listed below:

Self-awareness and reflection

5.1.C Ability to evidence reflexivity, self-awareness and the active use of self to work at depth in the therapeutic relationship and throughout the therapeutic process.

6. Supervisor's Report.

Applicants also need to supply a **recent report from their clinical supervisor**, in which the supervisor addresses the following questions:

There's a separate form for you to send to your supervisor. Access form [here](#).

The questions asked are:

1. Is the applicant's personal statement consistent with your knowledge and understanding of their work experience and how they work with clients? Yes or No? If No, or you are in doubt, please give your reasons.

2. If you have supervised the case material used to evidence sections 3 and 5, do you agree that the applicant's description is an accurate reflection of their work with this client(s)? Yes or No? If No, or you are in doubt, please give your reasons.

3. Please read the applicant's personal statement in full (criteria 1-5), For reference the framework can be found from page 16 to page 31. Please then comment on their overall competence in relation to the Column C competences in the SCoPEd framework. Please make reference to any areas for future development in relation to the SCoPEd framework that have been agreed with the applicant.

4. In your experience of the applicant, are they an 'Independent, competent and ethical counsellor / psychotherapist who has demonstrably developed their knowledge, experience and ethical working since their initial accreditation' who is, therefore, ready for Senior (Column C) accreditation? Yes or No? If No, or you are in doubt, please state your reasons.



If you have any questions please do not hesitate
to contact our team



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