# STUDENT PLACEMENT HANDBOOK (GENERIC)

January 2020

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Psychotherapy

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#### OVERVIEW OF THE MANCHESTER INSTITUTE FOR PSYCHOTHERAPY

The Manchester Institute for Psychotherapy (MIP) evolved from the Lifestream Centre for Psychotherapy, which was founded by Bob Cooke TSTA in September 1987.

The Manchester Institute became a Training Organisation of the UKCP in October 2015 and a Training and Accrediting Member of the UKCP (HIPC) in 2017.

Bob Cooke was interested in the idea of creating a Therapy Centre in South Manchester and saw it as a place where people could come, knowing that they would be attended by skilled therapists, who treat clients with high regard and with confidence, in safety and confidentially.

We have a fundamental belief that those who are personally motivated and willing to change will do so, and in so doing inspire the growth of others. Whilst on this path of self-development those who change will enhance the development of their environment.

For those working and training at the Institute, personal therapy and supervision are a basic requirement, thus ensuring a clear and safe environment for all clients in attendance.

"We have a fundamental belief that those who are personally motivated and willing to change will do so, and in so doing inspire the growth of others."

The Institute is committed to the values inherent in anti-oppressive practice. The aim of this policy is to provide a safe environment for all who pass through the Institute. It is expected that all people be equally respected and difference of any kind be valued and accepted, for example, in relation to race, physical or sensory disability, sexual orientation, gender, age, size, class, religion.

The Institute's Psychotherapy Training is recognised by the Institute of Transactional Analysis (UKATA) and the European Association For Transactional Analysis (EATA), which is a member of the United Kingdom Council for Psychotherapy (UKCP).

The Institute each year enrols a new student intake group for a four year Diploma course which in turn leads to their registration as UKCP psychotherapists. To achieve this, they have to attend: 600 hours of tutor face to face teaching throughout the course; 40 hours of personal therapy each year; attend supervision for their client work; produce academic assignments - including a research project to a high calibre - attending a mental health placement - 80 hours: 160 hours ALD; 450 client contact hours.

In the December module of the second year trainees will undertake their clinical competency evaluation where their ability to work with clients is evaluated by their tutor. This is a robust and formal evaluation, which gives the successful student the Manchester Institute's clinical endorsement to practice as a beginning practitioner, with guidance and supervision.

#### **CLINICAL PLACEMENTS**

After the clinical competency endorsement has been awarded by MIP, this will be a endorsement that the trainee is ready to apply for a placement either with MIP or with an external Placement Provider.

The trainee needs a minimum of 100 clinical hours with a placement provider by the end of the 4th year of training at MIP. This is one of the parallel obligations for graduation at MIP.

The 100 hours can be gained with one or more placement providers and it is expected that they will see two to three clients per week in order to gain hours required.

It is expected that the trainee will write a short case study (5000 words) on one of their placement clients. This will be assessed and is part of the parallel obligations for MIP graduation, and therefore needs to be submitted to the course tutor by April of the 4th year.

Trainees are required to keep a written record of their work, as may be required to make audios of their actual practice. Material about clients is regarded as confidential and when used for assignments and/or for supervision client anonymity must be preserved.

Trainees shall at all times work in accordance with UKCP's Ethical Framework. This requires that they work to specific contracts with their clients and have adequate supervision of their work, at a ratio of 1:6 hours. Approved supervisors will report to the Institute on a student's progress.

Please note that students will be required to have a UKCP supervisor, and if the placement provider does not provide the supervision the cost will be passed on to the student, usually £40-£50 per hour per month. It is the responsibility of the student to check that the supervision you have is UKCP recognised.

The programme takes responsibility for monitoring and evaluating a student's practice. A responsible person within the Placement Provider, preferably a qualified counsellor/psychotherapist, will have oversight of a student's work, ensure appropriate referrals are made and take overall clinical responsibility for clients in the Placement Provider. Trainees are to be informed about the provision made by the Placement Provider for medical and psychiatric referral.

For employers and public liability purposes in accordance with insurance industry practice, agencies providing placements will regard a trainee as its employee while undertaking placement. Professional Liability by the Institute will cover all trainees in placement. In addition trainees will take out their own individual insurance.

Although the Placement Provider Co-ordinator and the Placement Provider representatives cannot engage in regular face-to-face meetings, it is essential that agencies maintain contact in relation to the placement when this is necessary. Bob Cooke (The Clinical Director) or the programme leader would be appropriate people to contact regarding an individual trainee.

Complaints or concerns about trainees or the programme should be made in the first instance to the Clinical Director, Bob Cooke.

Postal address: The Manchester Institute for Psychotherapy 454 Barlow Moor Road Chorlton-cum-Hardy, Manchester M21 0BQ. Telephone: 0161 862 9456

Email: bob@mcpt.co.uk

The Placement Provider shall provide trainees with confirmation of its requirements and arrangements with regard to health and safety, confidentiality, discipline codes and similar matters, and underline the student's obligation to comply with such requirements.

The Manchester Institute provides a co-ordinator for day-to-day liaison between Agencies and trainees. The co-ordinator will support the administration and the placements.

In the event that a trainee is considered by the Placement Provider to have breached any of its requirements, the Placement Provider shall provide full details of the matter to the Clinical Director, together with a recommendation as to the resolution of the matter.

In the event that a student's breach of the Placement Provider requirements or his/her attitude or performance is considered by the Placement Provider to render him/her unsuitable for work in the Placement Provider, then the Placement Provider shall have the absolute right to remove the trainee permanently from the Placement Provider. In view of the seriousness of such a decision this will be taken only at a senior level within the Placement Provider. In the event that a trainee subsequently proceeds against the Institute, by way of appeal or otherwise in respect of the removal from the Placement Provider, or its consequences for the student's registration with the Institute, the Placement Provider will provide all reasonable assistance to the Institute in dealing with the appeal or other action.

#### **PSYCHOTHERAPY PRACTICE: GUIDANCE FOR TRAINEES**

It is a requirement for UKCP Accredited Programmes that the trainee must have opportunities for substantial and regular psychotherapy work with real clients (i.e. in addition to any skills practice with fellow trainees). On these programmes trainees must complete a minimum of 100 hours of supervised psychotherapy practice in placement. Formal client work during training on this programme does not start usually until March/April of the second year. Of course, it may start later according to which placement provider you are assigned.

This is preceded by formal assessment of trainees' therapeutic skills, the clinical competency assessment. When this has been satisfactorily completed, it is expected that trainees should undertake an average of 2 or 3 hours of psychotherapy practice each week from the beginning of their placement, until they have completed the 100 hours.

Experience indicates that, in order to accommodate holidays, missed or cancelled appointments, sickness absence, etc. most trainees find it best to arrange 2-3 client appointments per week once their placement is underway.

Trainees, with support from their supervisor, are responsible for ensuring that they undertake sufficient psychotherapy placement practice, with regular supervision, both of which they record in their Professional Log, which is presented for evaluation at the end of their 4th year of training.

#### **AUDIO-RECORDING OF CLIENT WORK**

Trainees will need to ensure that they can regularly make audio-recordings of their work with clients. Time is committed in the training/supervision to discuss the best way forward with regards to recording and the best ways to deal with any issues surrounding this process.

However, it must be emphasised to trainees that it is essential that they have the agreement of their placement and their placement client to record. It is essential for this training that trainees make audio-recordings of their work which can then be used for supervision and for future evaluation within the training programme.

In order to facilitate this, it is important that trainees have a choice of recordings to present for assessment. Trainees' audio-recordings can be regularly used as part of the supervisory process.

#### **SUPERVISION**

If supervision is provided by the placement, it is necessary that the trainee is clear whether it is BACP supervision or UKCP supervision, or any other type of supervision which is offered.

As this programme is UKCP recognised, the trainee within the placement would need to have a UKCP supervisor. If this supervisor utilises any other supervision offered by the placement this will be counted as ALD hours in their supervision log, and as said previously in this handbook, they would to make sure that they have a UKCP supervisor with regards to their placement supervision.

Generally it makes sense for the frequency of supervision to be tailored to the number of clients a trainee is seeing over any period of time. Additionally, there may be cases where trainees will need supervision sessions above and beyond the minimum number required by the programme if they have seen more clients. It is expected that trainees have a ratio of one hour's supervision to every 6 practice hours.

Trainees and supervisors are jointly responsible for ensuring supervision takes place on the requisite number of occasions. While it is recognised that some trainees have difficulty initially getting clients and may not need the earlier supervision sessions, it is essential that they are compensated for these later when they are seeing more clients in order to fulfil the requisite number of hours of supervised psychotherapy placement.

There should be a clear agreement as to when and where placement supervision takes place, and a mutual understanding of how arrangements are changed or postponed in the event of such things as sickness or holidays etc. It is also expected that supervisors will be available for emergency telephone contact by trainees where there is an urgent supervision issue.

Trainees are advised that they should aim to complete at least 50 hours of practice before the end of September at the start of year four, since the need to catch up on work from year 3 puts trainees under considerable pressure in the final year.

#### ASSESSMENT OF CLIENT WORK (THE PROFESSIONAL LOG)

Trainees are required to keep a record of the clients they have seen during their psychotherapy placement and subsequent supervision sessions in their professional log.

This may be taken along to supervision for the supervisor to see. Supervisors vary as to how much they make use of the log. Other supervisors prefer if trainees tell them directly about their work in the supervision session.

However, it is important that the supervisor has regular access to the trainee's professional log if they wish to check how they are working and whether they are keeping it up-to-date.

The trainee's tutors evaluate the professional log. It is important that supervisors' reports are in the log at the point where it is due for review or assessment. The template for these reports is in the back of this document.

If the report is not available tutors may contact a supervisor by telephone. It is anticipated that if a supervisor feels a trainee is not competent to pass the placement this would be discussed not only with the trainee but also with the tutors at any point during the training but certainly before the final 2 months of the training.

#### **ROLE OF SUPERVISORS/PLACEMENT**

Supervisors of the placement provider are expected to have experience of the supervisory and assessment role and understand the essential elements of a psychotherapy practice. It is recognised that they will have their own way of working and this is respected. Their input and knowledge of trainees' practice is valuable and they are asked to provide written reports about their trainees on occasions during the programme.

#### Reports and Reviews:

- (1) Mid term review (half way through the expected term of placement 50 hours).
- (2) A final report when the trainee has completed their psychotherapy placement hours.

A template for the mid term review and final report from the placement provider are in the back of this document.

#### PROCEDURE FOR THE APPROVAL OF SUPERVISORS

To provide supervision within a Placement Provider the supervisor must have:

- Membership of a counselling/psychotherapy professional body (i.e. BACP, UKCP, BPS).
- A supervisor's qualification or substantial experience of supervising counsellors/psychotherapists.
- A minimum of 5 years post-qualification experience of working as a practitioner.
- A humanistic orientation compatible with the programme's core model.

A trainee checks with the supervisor that he/she meets the above-mentioned criteria.

Please note if you are following the UKCP Pathway you must have supervision from a UKCP supervisor for your supervision hours to count.

#### PLACEMENT CLINICAL REPORTS

At the completion of the clinical work with each placement client, a report will need to be submitted to MIP and their respective supervisor within a **six week** timeframe.

Therefore, if the trainee over the period of 2 years has 4 different clients, 4 reports must be written. Two copies of each, one for MIP and one for their respective supervisor.

The report will include the trainee's view of the following in relation to each client the trainee has worked with.

- \* The Placement for example, were you satisfied with the placement experience in relation to this client, were you supported and encouraged to work within your personal and professional scope of practice relevant to your current stage in the programme of training.
- \* Health and Safety Issues for example, were there any safeguarding issues and how were they dealt with?
- \* Were there any issues with respect to the environment that you worked within and how did you deal with this?
- \* Did you identify any gaps in your learning or the support provided?
- \* Communication with the Placement Provider what was the process of referral of clients to placement trainee, did you feel that the client assessment by the placement provider was based on your learning needs and experience? Did you feel the client was matched appropriately to you with regards to meeting their needs?
- \* Supervision, for example did you feel supported with regards to your Supervisor and how effective was your supervisory experience?
- \* With regards to your placement client how did you progress with your clinical skills and knowledge with this client? Were there any identified learning opportunities provided by the placement/supervisor to meet any gaps/needs in clinical skills or knowledge?
- \* What were the business and treatment Contracts that you first established with your placement client?
- \* Were the Contracts completed? If not, why not?
- \* What were the reasons given for your client's endings? Did you come to a natural end, i.e. when the contract was achieved?
- \* Was it an enforced ending and if so what were your reflections regarding the enforced ending.
- \* What was the placement client's prognosis with regards to future progress?

# **Length of Report**

If the placement client only attended for up to six sessions, or less, the report needs to be maximum of **300-500 words**.

If the placement client's time duration with yourself is over six sessions then the report needs to be a maximum of **800-1000 words.** 

Please note there is a **six week** rule with regards to completion of the report and providing the documentation to MIP and your relevant supervisor.

#### **PAPERWORK**

It is necessary for paperwork (forms, client notes and reports) to be completed in a professional and timely manner.

With the only exception being their reports and the recording consent form (If completed), the trainee cannot take copies of their paperwork out of the Placement Provider. This is to ensure that client confidentiality and the data protection act is complied with.

Upon acceptance of a client, a file will be made by the Placement Provider, which will be held in compliance with the data protection act.

All paperwork is to be considered confidential and all MIP and Placement Provider personnel will abide by the UKCP's Code of Professional Practice and Ethics.

Placement Provider personnel will have access to the paperwork and this does not mean that the paperwork will be scrutinised by all personnel.

If there is a need for clarification on any aspects of the paperwork, then the query should be addressed to the Clinical Director of that Placement.

If a recording contract is made with the client, then it must be held within the client files at the Placement Provider, the trainee may photocopy this agreement and keep it safe in their personal files.

No recordings of the sessions may take place before the written consent of the client has been gained.

Tapes are to be labelled in a non-identifying manner and they are to be stored and kept safe by the trainee. The client has the right to withdraw their consent at any time.

All forms that are relevant to the placement including Health & Safety form, reviews and reports contribute towards the trainee's final portfolio.

All forms must be included in the Portfolio, or the trainee risks their placement not being fully evidenced. Therefore, their parallel obligations would not be completed and they would need to complete further placement hours to graduate.

# **EXAMPLE OF CLIENT INFORMATION FORM**

Full Name
Date of Birth
Address (If new information the client must inform the student)
Postcode
Next of kin/to be notified in an emergency
Tel. No.
Doctor's name and address/phone number
Tal No.
Details of any modication
Details of any medication
Lamily History (Parents/siblings/children/significant others)
Falliny mistory (Farents/sibilings/crimuren/signimount stricts)
Process for attanching
Reason for attending
Outcome required/other information

# **RECORDING CONTRACT**

I,have been asked to give my consent for recordings of my sessions with to be recorded.
I understand that this is ordinary for trainees to record sessions and that this is necessary for reflective practice, supervision, research practice and examinations.
I understand that I can withdraw my consent at any time and I have been assured if this is my choice, this will not impact upon the therapy.
I have the choice to ask for all previous recordings to be erased at any time, the exception being if it is one calendar month before an examination, however the recording will be erased immediately after the completion of the examination.
The recordings will only be used for clinical supervision, research or examination purposes. They will not be heard by anyone who is not bound by a professional code of ethics and confidentiality.
I understand that identifying information, such as my name, names of others, places and other details will be changed to protect me.
I understand that the student will be responsible for the safety of the recordings, keeping them safe and secure. This includes the use of passwords if the recordings are kept on a memory stick, pc or laptop and registered with the ICO.
I understand that the recordings will be erased when the student has completed their training at the very latest.
I confirm that I have not been put under any pressure to consent to recording
I give my consent to the recording of my sessions
Student's nameDate
Signature
Client's name
Date Signature

Two photocopies of this contract are to be made by the student, one for the client and the second for the student's records. The original to be filed at MIP.

# Three way contract between the Manchester Institute of Psychotherapy, the Placement Provider and the Student

This is a three way contract for therapy between the Placement Provider, the trainee in advanced psychotherapy training (known as the student), and the Manchester Institute of Psychotherapy (MIP).

#### MIP will:

- \* Initially have the written confirmation of the student's tutor that the student is competent to practice.
- \* Ensure the student is in regular supervision, will monitor and evaluate the student's clinical practice.
- \* Advise the client if there are grounds for discontinuing the placement, e.g. if the student leaves the training.
- \* Provide a suitable venue.
- \* Provide a secure filing system
- \* Provide a minimum of one and no more than three clients for the maximum of one year.

#### The Student will

- \* Attend MIP training; remain in regular therapy and supervision.
- \* Attend meetings that are pertinent to their placement.
- \* The student will ensure that they practice and abide to the UKCP's codes of Ethics and Professional Practice.
- \* The student is responsible for completing Placement Provider and MIP paperwork and filing notes on sessions.
- \* Report to the Placement Provider and their supervisor any issues that may impact upon their ability to practice.
- \* The student may not under any circumstances see the client after the period of twelve months or move the client to another practice without prior permission of MIP and the Placement Provider.

#### The Placement Provider will:

- \* Inform MIP if their placement policy changes
- \* Inform the student if the client is unable to attend the session.
- \* At the mid-way session and at the end of the work complete a written report on the trainee's progress.
- \* A minimum of one session to be held weekly over the maximum period of 50 hours.
- \* The client cannot see the student at any other practice except the agreed practice and building of the Placement Provider.
- \* Recordings/Questionnaires completed may be used for supervision/research purposes, identities will not be disclosed at any time
- \* Keep the student "safe" and recognise their level of competence at assessments.

Course tutor	on behalf of MIP
I believe that	is competent to practice
Signature	
Date	
Placement Provider	
Client: I Have contract	read and understood the
Signature	
Date	
Student: I Have contract. I will abide by the MIP Code of Ethics and I of the Placement Provider	
Signature	
Date	

It is the responsibility of the student to get this contract signed by each party, then for it to be photocopied, and one copy for MIP (to be kept in client file) and another for the Placement Provider to be given within 4 weeks. At any time I understand my supervisor may check the files to ensure these and other paperwork are complete.

# MIP/PLACEMENT PROVIDER SUPERVISOR'S REPORT

# MID TERM REVIEW / END OF PLACEMENT REVIEW

(\*delete as appropriate)

Date of reportSupervisor
The traineehas been in group/individual supervision for months
Of the possible groups/sessions have been attended
Reasons for non attendance and notification)
Number of clinical practice hours at placement
Please comment on the student's ability to:  Establish a therapeutic alliance
Assess the client's suitability

# Date of report ..... Supervisor..... The Trainee ..... Work with the therapeutic relationship Critically reflect on the therapeutic process and on his/her own functioning Make effective use of the supervision group Ability to identify, clarify and assess clinical issues

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Date of report Trainee	•
Supervisor	
Ability to self monitor	
Demonstrate an ethical understanding to support their practice	
Demonstrate a capacity for autonomy in their practice	
	7
	_
Work pro-actively and co-operatively to formulate solutions to ethical issues	
	$\neg$
The trainee identified 'growing edge' was	
In their practice they have worked in this area (acceptament and example)	
In their practice they have worked in this area (assessment and example)	
Signature of Supervisor Date Date	
Signature of TraineeDateDate	
Signature of Year Tutor Date Date	
When completed and discussed with the student, the trainee will make two copies MIP files to hold one, Supervisor/Placement Provider holds the second, then stude the other.	

# **EXAMPLE OF PROFESSIONAL LOG**

MONTH & YEAR	LOCATION OF PRACTICE HOURS	NUMBER OF PRACTICE HOURS	DATE OF SUPERVISION & HOURS	SUPERVISOR'S SIGNATURE

# MID TERM REVIEW BY PLACEMENT PROVIDER

Name of placement
Name and job title of the person writing the review
Name of trainee
Number of sessions practiced at the placement; give the date of the start of the placement and the expected final date:
Has the trainee missed any appointments with the client? If so, was adequate notice given?
Is the trainee attending supervision/ALD at the placement if this is provided?
Is the trainee engaged with the placement in your opinion?
If not, what does the trainee need to do to accomplish this?
Is the trainee abiding by the code of practice, including the health and safety policy of the placement? If not, what have you seen?
Has the trainee completed the placement's paperwork to the standard required? If not what needs to change?
What is your experience of the trainee?
Does the trainee require any further support to continue their practice in your opinion?
Signed Date

# END OF PLACEMENT REVIEW BY THE PLACEMENT PROVIDER

Name of placement
Name and job title of the person writing the review
Name of trainee:
Number of sessions practiced at the placement; give the date of the start of the placement and the final date.
Did the trainee miss any appointments with the client? If so, was adequate notice given?
Did the trainee attend supervision/ALD events at the placement if this was provided?
Did the trainee engage with the placement in your opinion? If not, what does the trainee need to do to accomplish this?
Did the trainee abide by the code of practice, including the health and safety policy of the placement? If not, what have you seen?
Did the trainee complete the placement's paperwork to a satisfactory standard? If not what needs to change?
What is your experience of the trainee?
Does the trainee require any further support to manage their practice in your opinion?
Signed Date

#### UKCP CODE OF ETHICS AND PROFESSIONAL PRACTICE

Ethical principles and Code of Professional Conduct adopted by the Board of Trustees in 2019

This Code contains the standards of ethics, practice and conduct which UKCP expects of all practitioners, and which must be followed whatever your modality of practice and whether you meet clients in person, online or otherwise.

The term 'practitioner' means an individual UKCP registrant who practises psychotherapy or psychotherapeutic counselling.

The term 'client' includes individuals, couples, families or groups who engage in psychotherapy or psychotherapeutic counselling.

Should a concern arise about a practitioner's practice, it is against these standards that it will be judged under the Complaints and Conduct Process.

The practitioner commits to engage with the challenge of striving for ethical practice and conduct, even when doing so involves making difficult decisions.

In the numbered points below, we set out the things we regard as key to ethical practice and have grouped them under these headings:

- Best interests of clients
- Professionalism
- Communication and consent
- Records and confidentiality
- Professional knowledge, skills and experience
- Social responsibility
- Trust and confidence

#### As a practitioner you must:

Best interests of clients

- 1. Act in your client's best interests.
- 2. Treat clients with respect.
- 3. Respect your client's autonomy.
- 4. Not have sexual contact or sexual relationship with clients.
- 5. Not exploit or abuse your relationship with clients (current or past) for any purpose including your emotional, sexual or financial gain.
- 6. Not harm or collude in the harming of your client or the clients of others.

#### Professionalism

- 7. Decline any gifts, favours, money or hospitality that might be interpreted as exploitative.
- 8. Be aware of the power imbalance between the practitioner and client, and avoid dual or multiple relationships¹ which risk confusing an existing relationship and may impact adversely on a client. If a dual or multiple relationship is unavoidable, for example in a small community, take responsibility for clarifying and managing boundaries and protecting confidentiality.
- 9. Exercise all reasonable care before entering into a personal or business relationship with former clients, taking into account the time that has elapsed since therapy ended. Should such a relationship prove to be detrimental to the former client, you may be called to answer an allegation of misusing your former position.
- Recognise that your behaviour outside your professional life may have an effect on your relationship with clients and take responsibility for critically examining these potential negative or positive effects to the benefit of the client.

#### Communication and consent

- 11. Provide in your advertising, and on request, a clear and honest statement of the qualifications relevant to your field of practice and your UKCP registration, and advertise your services accurately and in a responsible and professional manner, without exaggeration.
- 12. Ensure that the use of title such as "Doctor/DR" and post nominal initials after a name in communications are: accurate; indicate whether it is a medical or academic qualification; and reasonably informs the public of their relevance to the practice of psychotherapy.
- 13. Not make any claims which you cannot demonstrate to be true or include testimonials from clients in any advertising.
- 14. Explain to a client, or prospective client, your terms, fees and conditions and, have information readily available to clarify other related questions such as likely length of therapy, methods of practice to be used, the extent of your own involvement, complaints processes and how to make a complaint, as well as arrangements for referral and termination of therapy.
- 15. Confirm each client's consent to the specifics of the service you will offer, through a clear contract at the outset of therapy. We do not specify a written contract but in the case of any conflict a clear written contract supports both the client and yourself. Help clients to understand the nature of any proposed therapy and its implications, what to expect, the risks involved, what is and is not being offered, and relevant alternative options.
- 16. Not intentionally mislead a client about the type or nature of psychotherapy practised.

<sup>&</sup>lt;sup>1</sup> Such relationships could be social or commercial relationships between practitioner and client, or a supervisory or training relationship running alongside the therapeutic one.

17. Only participate in research about clients with clients' verifiable and informed consent before the commencement of therapy and research, clarifying the nature, purpose and conditions of any research in which clients are involved and in accordance with relevant codes and guidance. Pay particular attention to any additional guidance or special considerations which may apply to specific groups, such as children and young people.

#### Records and confidentiality

- 18. Respect, protect and preserve clients' confidentiality. You must protect sensitive and personally identifiable information obtained in the course of your professional work.
- 19. Safeguard the welfare and anonymity of clients when any form of publication of clinical material is being considered and to always obtains your client's verifiable consent in any case where the welfare or anonymity of a client may be compromised. This includes situations where a client or former client might recognise themselves in case material despite the changing of names or actual circumstances.
- 20. Make notes appropriate to the modality of therapy being practised, and keep records which are accurate, legible and timely. Keep clients' information confidential, subject to legal and ethical requirements, and discuss it only within appropriate professional settings.
- 21. Notify clients, when appropriate or on request, that there are legal and ethical limits to confidentiality, and circumstances under which confidential information might be disclosed to a third party.
- 22. Consider obtaining legal and ethical advice in relation to providing information for judicial or administrative proceedings, and as to the potential impact that this could have on the commitment of confidentiality to the client, even when client consent is given.

#### Professional knowledge, skills and experience

- 23. Offer only the forms of therapy in which you have had adequate training or experience.
- 24. Understand the limits of your competence and stay within them in all your professional activity, referring clients to another professional when appropriate. This includes recognising that particular client groups, such as children and families, have needs which not all practitioners are equipped to address.
- 25. Ensure ability to practise by securing supervision and ongoing professional education and development sufficient to meet the requirements of UKCP, its modality colleges and its organisational members.
- 26. Ensure that you do not work with clients if you are not able to do so for physical or mental health reasons, or when impaired by the effects of drugs, alcohol or medication.
- 27. Make considered and timely arrangements for the termination of a therapeutic relationship, or if you are unable to continue to practise,

- ensuring that clients are informed and alternative practitioners are identified where possible.
- 28. Have arrangements in place for informing clients and, where appropriate, providing them with support in the event of your illness or death.

#### Social responsibility

- 29. Actively consider issues of diversity and equalities as these affect all aspects of your work and acknowledge the need for a continuing process of self-enquiry and professional development.
- 30. Not allow prejudice about a client's sex, age, colour, race, disability, communication skills, sexuality, lifestyle, religious, cultural or political beliefs, social economic or immigration status to adversely affect the way you relate to them.
- 31. Avoid behaviour that can be perceived as abusive or detrimental to any client or colleague based on the above factors.

#### Trust and confidence

- 32. Act in a way which upholds the profession's reputation and promotes public confidence in the profession and its members, including outside of your professional life as a UKCP practitioner.
- 33. Maintain an awareness of, and comply with, all legal and professional obligations and UKCP polices which apply to your practice.
- 34. Ensure that any communication in which you take part, and in particular your participation in social media, is carried out in a manner consistent with this Code.
- 35. Safeguard children and vulnerable adults, recognising your legal responsibilities concerning their rights and taking appropriate action should you consider any such person is at risk of harm.
- 36. Ensure that you are familiar with and understand UKCP's published policies and guidances, in particular those on Safeguarding and on the Memorandum of Understanding on Conversion Therapy<sup>2</sup>.
- 37. Challenge questionable practice in yourself or others, reporting to UKCP potential breaches of this Code, and activating formal complaints procedures especially where there may be ongoing harm to clients or you have significant grounds for believing clients to be at risk of harm.
- 38. Ensure that your professional work is adequately covered by appropriate indemnity insurance or by your employer's indemnity arrangements.

<sup>&</sup>lt;sup>2</sup> These can be found on the UKCP website.

- 39. Co-operate with any lawful investigation or inquiry relating to your psychotherapeutic practice. Inform UKCP and any relevant organisational member if you are:
  - a. Charged with a criminal offence;
  - b. convicted of a criminal offence, receive a conditional discharge for an offence, or accept a police caution;
  - c. disciplined by any professional body or membership organisation responsible for regulating or licensing a health or social care profession; or d. suspended or placed under a practice restriction by an employer or similar organisation because of concerns relating to your competence, health or practice of psychotherapy.

UKCP Registered office: 2 America Square, London, EC3N 2LU

Registered Charity No 1058545

Company No 3258939

Registered in England Ethical Principles and Code of Professional Conduct adopted by the Board of Trustees in September 2009

Revised Date Submitted to Ethics Committee & Registration Board 27 Nov 08

Ethics Committee 4 Dec 08

Board of Trustees 26 Jan 09

Standards Board 5 Feb 09

Education & Training Committee 19 Feb 09

Ethics Committee 5 Mar 09

Feedback following consultation with OM's/College/College Chair of Ethics Aug 09

Changes following Consultation with OMs and College Sept 2009

Changes following Ethics Committee meeting 17 Sept 09

Adopted by Board of Trustees 26 Sept

Adopted by the Board of Trustees and "live" from 1st October 2019



#### **HEALTH & SAFETY FORM**

If you take a student on clinical placement will you ensure that she	e/he will receive an induction	
on commencement of the placement?		
Do you have up-to-date professional indemnity insurance?		
Do you have up-to-date public liability insurance?		
bo you have up-to-date public liability insurance:		
Do you have a fire certificate on your premises?		
If you have answered "no" to the above question, have you carried out a fire risk assessment of your undertaking as required by the Fire Precautions (Workplace) Regulations 1997?		
Do you have suitable and sufficient first aid equipment and assistance readily available?		
Do you record and report all accidents, near misses, dangerous occurrences, diseases and violent incidents as required by the Report of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995?		
Has your placement provider ever had legal proceedings taken against it with regards to Health & Safety?		
Are any criminal legal proceedings currently being taken against you as a placement provider with regards to Health & Safety?		
I confirm that the above statements are correct:		
Name of person confirming the Health& Safety Checklist		
Signature		
Date		
Signatures:		
On behalf of the Clinical Placement Provider:  Name of Clinical Placement Provider:		
Address of Clinical Placement Provider:		

# The Manchester Institute For Psychotherapy

454 Barlow Moor Road Chorlton, Manchester. M21 0BQ Tel: 0161 862 9456 • www.mcpt.co.uk • Email: bob@mcpt.co.uk

Bob Cooke BA T.S.T.A. Principal Director



Contact Telephone Number:
Contact Email Address:
Role:
Signature:
Date:
Internal Placement Provider Supervisor:
Name:
Contact Telephone Number:
Contact Email Address:
Signature:
Date:
OR
External Supervisor
Name:
Contact Telephone Number:
Contact Email Address:
Signature:
Date:
Student:
Name:
Student Number:

To be completed by Placement Provider. One copy for MIP and one copy for the Trainee

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