



Psychotherapy Trainee Programme  
and  
Assessment Handbook 2022



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## INTRODUCTION – TRAINEE PROGRAMME

This introduction provides an overview of the Psychotherapy Trainee Programme and its requirements, as well as useful information for those applying for the position of Psychotherapy Trainee at Ashburn Clinic.

Ashburn Clinic is an independent, working psychiatric hospital owned and operated by the not-for-profit Ashburn Hall Charitable Trust and Board. One of the aims of the Trust is to promote the study of psychiatry and psychodynamic psychotherapy.

In fulfillment of this aim, Ashburn Clinic undertakes training placements for basic and advanced psychiatric registrars, medical students, nursing and occupational therapy students. The Clinic also co-ordinates a closed modular series of seminars in the theory of psychotherapy, an open series of lunchtime seminar presentations and some weekend psychotherapy supervision seminars.

### Hospital and Therapeutic Community

Ashburn Clinic is a hospital that provides assessment, treatment and recovery from mental illness. Established in 1882 as an alternative to state hospital care, Ashburn Clinic now operates as a therapeutic community, providing inpatient, day patient and outpatient psychiatric and psychotherapy services.

Our mission statement states: Ashburn Clinic works in partnership with people with mental health and addiction difficulties to improve their well-being and quality of life.

Our aim is to provide patients with the highest possible standard of care within our respective psychiatric and psychotherapy disciplines, and to help restore them to the best possible quality of life by:

1. Enabling patients to learn more about their problems and difficulties, thereby increasing their ability to effect change.
2. Encouraging personal responsibility for their own behaviour and situation.
3. Assisting patients to live successfully in the outside world without resorting to unhelpful and unhealthy behaviour patterns, particularly when faced with stressful or difficult situations.

We recognise the individuality of all who come here. Our approach is to the whole person, taking into account the significant others in their lives, and respecting cultural and spiritual dimensions. We acknowledge the partnership with tangata whenua by honouring the spirit and the articles of the Treaty of Waitangi.

### Therapeutic Community Principles

The core principles of democratic therapeutic communities such as Ashburn are:

- Attachment: the process of joining, belonging to, and leaving a therapeutic community evoke a variety of emotional responses (Haig 1999).
- Democratisation: every member of the community (staff and patients) share in making decisions about community affairs, and are empowered to share in responsibility for the community (Rapoport 1960, Haig 1999).
- Containment: usually a range of distressing emotions and behaviours are able to be tolerated by the community as there is sufficient strength within the community as a whole

to contain and hold the anxiety or pain such feelings generate (Rapoport 1960, Haig 1999).

- **Communication/Communalism:** tasks and social opportunities are shared by everyone (patients and staff), and a culture of openness is fostered so that the honest communication of feelings is possible (Rapoport 1960, Haig 1999).
- **Reality Confrontation:** patients continually have other people presenting interpretations of their behaviour so defence mechanisms such as denial, distortion and confusion become obvious. Over time, ongoing therapeutic interventions enable patients to reflect on how they are with other people and to make changes (Rapoport 1960).

A therapeutic community is a place where patients and staff work alongside each other in an atmosphere of open communication. At Ashburn Clinic the traditional hospital hierarchy is relaxed, so we can build a more democratic and open style of relating between staff and patients.

Patients are expected to take an active role in their care, and to take part in the running of the community. They will also help and support each other in the challenges of living and working within a therapeutic community.

## **Ashburn Clinic Therapeutic Community Programme**

The main therapeutic programme at Ashburn Clinic utilises a structured day, with an emphasis on group meetings of various kinds. Within the Ashburn Clinic community, patients enact their familiar ways of relating to other people, which is then explored through processes such as group work. Through being able to understand and communicate to others the reasons for the development of their own individual difficulties, patients will be better able to cope with the necessary effort and pain which characterises major personal change.

The Ashburn Clinic community concentrates on the meaning of each person's feelings, actions and relationships, so changes in understanding and behaviour can be made. Staff's own conduct and participation in the community will ensure that as far as possible the community is an environment which enables open, honest and effective communication.

Effort is made in the assessment process to understand a person's underlying developmental deficits and to formulate these deficits psychodynamically. This understanding pervades all aspects of the patient treatment programme including:

### **Patient Programme**

#### **1. Small psychotherapy groups**

Patients are allocated into one of three psychodynamic therapy groups. These are groups facilitated usually by two facilitators. One is a psychotherapist and the other may be a nurse or Trainee. These groups will have approximately 8-10 patients attending and this group remains stable throughout their time at Ashburn Clinic. Patients and staff meet for these groups twice per week and form a strong cohort of people who engage in treatment together.

The Trainee will co-facilitate a small psychotherapy group with a psychotherapist for a minimum of one year. There is a theoretical component which runs in parallel with the experience of the group work. This combined experience will provide the beginnings of a comprehensive understanding of group work. The Trainee will begin to examine and understand the processes that contribute to the therapeutic efficacy of group

psychotherapy. The Trainee will be required to write up the experience of working in a small psychotherapy group, plus their experience of supervision of the group with both the co-facilitator and their individual supervisor.

## 2. Large psychotherapy group and community meetings

Community meetings are twice-weekly meetings of the whole patient group and clinical staff group. This routinely includes doctors, nurses and allied health professionals together with patients. The issues that are explored are the relational dynamics between individual people and how this might be reflective of themes that are occurring in the community.

The Trainee will be expected to attend community meetings throughout their traineeship. These large groups are places when the dynamics of the lived experience of the therapeutic community are explored. The Trainee will have the experience of both being a staff member and a participant in the community and have the opportunity to explore the particular potential of large groups to provide therapeutic benefit. Once again, the theory behind large groups and their efficacy will be explored and the Trainee will be supervised in this context by their individual supervisor at the time.

## 3. Individual psychotherapy

When patients arrive at Ashburn Clinic they are assessed as to their suitability for psychodynamic psychotherapy. The therapists can provide either supportive psychotherapy or more in-depth psychodynamically-orientated psychotherapy. Patients are allocated to the appropriate therapist at an allocation meeting which occurs once a week. The majority of patients are allocated a therapist, but a small minority are not for reasons of being too unwell or an inability to utilise psychotherapy due to, for example, severe depression or cognitive deficits.

For the first six months of psychotherapy training, the Trainee will have had the opportunity to begin to study the theory of psychotherapy and have had the opportunity to observe therapists in action through reporting back in clinical meetings. They will have had the opportunity to attend less intense unit level meetings and will have written up what they consider to be some of the more important dynamic issues.

The Trainee will be allocated patients beginning with a small number, usually halfway through the first year. Initially there is close hour-to-hour supervision of psychotherapy work. The Trainee increases their case load up to 3-4 inpatients as the Trainee is felt to be managing this. The individual therapy role is supported by case write-ups as outlined later in the manual, and attendance at the seminar series, which will provide the theoretical background.

## 4. Living and learning activities

These activities, eg. gardening, cleaning, cooking, are undertaken in the community. People are expected to participate and be able to help, even in minor ways. Absences from activities are noted as people are all valued members of the community. These are opportunities for new and learning experiences, as well as relational experiences.

The Trainee will take part in all activities of the therapeutic community. This will be complemented by a theoretical understanding of therapeutic communities and psychosocial nursing. Trainees will experience the joys and discomforts of living and learning together! Boundary issues are clearly highlighted and explored, both in individual therapy work, group therapy work and in the Trainee's individual supervision.

## 5. Creative and recreational activities

It is often a very important part of a person's treatment to learn how to use "down time". Art, music and sport is encouraged in the day-to-day programme with specific groups related to these activities. Weekend activities and evening activities are planned to obtain maximum therapeutic benefit for patients.

The Trainee will have the opportunity to take part in art and/or music groups depending on their interest. They will also be encouraged to understand some of the theoretical understandings of these types of therapies and how they assist in moving people to wellness.

## **Staff Groups**

### 1. Experiential groups for staff

The Trainee will be expected to attend a staff group where the staff examine and talk regarding the stresses and strains of working with people with personality difficulties. This occurs weekly, apart from the first Wednesday of the month, which is an agenda-driven staff meeting.

Given the nature of the work with severely ill persons with personality disorders in particular, there are often aspects of patients' behaviour that are projected into staff. By regular attendance at the Staff Group the Trainee has the opportunity to psychologically consider and share experiences which enables the Trainee to be able to assume a more therapeutic stance for the residents.

### 2. Clinical meetings and reviews

The Trainee will be expected to take part in clinical meetings where patients are discussed in the multidisciplinary team environment. Trainees will be expected to contribute both psychiatrically and psychotherapeutically depending on their role in patient care. Consideration will be made of the therapeutic community environment, and this will be discussed.

Clinical reviews occur at Ashburn Clinic at least once per month. This is a hospital-wide review of a person of particular concern. The Trainee will be expected to attend and take part in these regularly and contribute as appropriate to their clinical role.

### 3. Group psychotherapy supervision

Trainees have the opportunity to attend a supervision group for psychotherapy. This is a group that considers people more fully from a psychodynamic perspective. Trainees will be encouraged to both present and contribute to discussion around psychodynamic understanding of people and their progress at Ashburn Clinic. Some of the theory relevant to a person's presentation may also be discussed in this forum.

### 4. Individual psychotherapy for the Trainee

In coming to understand the psychological experiences that are engendered by being immersed in the therapeutic environment the Trainee is required to undertake their own psychotherapy throughout the traineeship. In this way the theoretical underpinnings and understandings are experienced for themselves. This will also assist with the stresses and strains of working in this environment, plus also working through some of the difficulties that may arise during the traineeship.

Trainees have the opportunity to observe and experience all aspects of the therapeutic programme and community setting. There is also an opportunity for outpatient psychiatric

assessment and management, as well as a small number of outpatient psychotherapy clients.

### **Bicultural Training and Supervision**

The Trainee will have the opportunity to participate in bicultural training and development opportunities alongside Ashburn staff. These include Ashburn community events, training sessions, as well as the Ashburn Clinic Bicultural Committee, which fosters bicultural initiatives within the therapeutic community. External cultural supervision will also be arranged as required.

### **Minimum Entry Criteria**

Applicants for the three-year psychotherapy training course should:

- Be at least 25 years of age.
- Have completed a tertiary education course (eg. university degree, Teachers College Diploma, polytechnic degree OR have demonstrated a personal capacity to study at university level).
- Submit a current Curriculum Vitae to support their application.
- Submit an autobiographical letter of not more than 2000 words length which indicates the applicant's general life experiences and reasons for wanting to train as a psychotherapist.
- Be of good character and be able to provide three suitable references affirming this.
- Be willing to undertake personal therapy as a requirement of the course.
- Consent to undertake a Police background check (including Children's Worker Safety Check).
- Agree to be governed by all hospital regulations and codes of ethics adopted by Ashburn Clinic.

The successful applicant will become an employee of Ashburn Clinic during the period of their training and will be offered an individual employment contract by the Clinic.

### **Psychotherapy Trainee: Job Description**

Trainees are employees and therefore required to perform tasks as specified in an appropriate job description. These are key abstracts from the current job description:

#### **Mission Statement:**

Ashburn Clinic works in partnership with people with mental health and addiction difficulties to improve their well-being and quality of life.

#### **Person specification:**

- Willingness to work within the Philosophy, Values and Mission of the Therapeutic Community
- Commitment to the principles of the Treaty of Waitangi
- Able to set priorities and meet required time frames
- Organisational ability
- Ability to communicate effectively at all levels
- High standard of work ethics and confidentiality.

**Key tasks:**

1. Participate in promoting and implementing the Therapeutic Community philosophy and mission and values of Ashburn Clinic.
2. Demonstrate an understanding of Health and Safety responsibilities.
3. Participate in the process of Continuous Quality Improvement.
4. Adhere to Ashburn Clinic's Policies and Procedures.
5. To attend clinical and unit meetings in the area of clinical attachment.
6. To participate in unit activities and, as appropriate, co-facilitate small psychotherapy groups.
7. To take on the Primary therapist responsibilities for inpatients and outpatients at a time when both Trainee and their supervisors feel this is appropriate.
8. To maintain accurate written records of clinical work.
9. To effectively communicate with referrers and, where appropriate, with other professionals and agencies who are involved with patients and their families.
10. To show competency in management of an increasing clinical caseload.
11. To maintain a satisfactory theoretical learning curve.
12. To carry out a Mother/Infant Observation study.
13. To achieve written and verbal evaluation targets.
14. To maintain adequate supervision.
15. To carry out other tasks as requested from time to time by their clinical supervisor, Convenor of the Education Committee or by the Medical Director.

This summary is abstracted from the current Position Description but is not to be construed as a complete description of the scope of a Trainee's tasks. These are defined at the time of appointment and will form an employment contract between the Trainee and Ashburn Clinic.

# TRAINING PROGRAMME OUTLINE AND REQUIREMENTS

## Overview

The three-year training programme offers theoretical and practical strands:

- In-house training in a structured tutorial environment
- Supervised experience provided in 1:1 psychotherapy and group psychotherapy, couples work and family therapy
- Regular seminars delivered by practicing clinicians through the medium of *The Advanced Theory of Psychotherapy Modular Series*
- Periodic assessment and review of theoretical components of training
- Clinical placements in a variety of settings: day programmes, residential and acute units within a therapeutic community
- Outpatient responsibilities for the Trainee(s)
- An intensive mother-infant observation
- An opportunity to initiate a membership application for NZAP.

Trainees are assigned a supervisor who will have oversight of and provide guidance to trainees through each year of the programme. Senior staff are assigned to clinically supervise trainees.

Trainees are assessed throughout the training programme and their advancement is subject to satisfactory achievement of the learning objectives. Because a significant portion of training in the theory of psychotherapy is delivered within *The Advanced Theory of Psychotherapy* modules it is a condition of appointment that trainees will attend and satisfactorily complete the requirements of this series.

## Assessment of Theoretical Knowledge

In general, theory is taught and assessed within the training tutorials and the *Advanced Theory of Psychotherapy Modular Series*. A Trainee's supervisor, charge nurse or other training staff may indicate where a Trainee might usefully extend their knowledge.

## Assessment of Practical Knowledge and Skills

A Trainee's supervisor, charge nurse or other staff involved in training will assess or assist in assessing the application of a Trainee's practical knowledge and skill. In general, the Trainee's supervisor has responsibility for collating formal and informal assessments and formatively using them to assist the development of the Trainee.

## Awards

Graduates of the Trainee Programme will receive Certificates of Completion for the Trainee programme and *The Advanced Theory of Psychotherapy Modular Series*.

These are local certificates which represent training courses which have good standing within the psychotherapeutic community in New Zealand, and as such are recognised by PBANZ and NZAP. They are not, however, registered as qualifications on the National Qualifications Framework.

## Training Year One: Objectives and Learning Outcomes

Objectives	Learning Outcomes	Performance Indicators (Standard: all required)
<b>To engage in a study of the theory of psychotherapy</b>	<ol style="list-style-type: none"> <li>To demonstrate basic knowledge of the theory of psychotherapy</li> <li>To be able to apply theoretical knowledge to clients in clinical situations</li> </ol>	<p><i>Attends tutorials and fulfils assessment requirements</i></p> <p><i>Supervisor and staff indicate Trainee's basic competence</i></p>
<b>To attend and participate in reflective clinical meetings</b>	To recognise the importance of meetings as an information exchange	<p><i>Attends meetings regularly</i></p> <p><i>Offers comment/information/critiques in a manner accepted by the participants as appropriate</i></p>
<b>To behave in a professional and ethical manner</b>	To understand and adhere to codes of ethical practice	<p><i>Supervisor ensures that relevant codes of ethics have been read</i></p> <p><i>No complaint of a breach of ethics has been upheld or remains unresolved</i></p>
<b>To be a reflective student/practitioner</b>	To maintain a record of personal development and progress	<p><i>First 6-month diary is regularly updated</i></p> <p><i>First 6-month diary is personally reflective</i></p>
<b>To observe carefully and accurately</b>	To carry out a clinical observation and record it	<i>Supervisor accepts records of observations as adequate and accurate</i>
<b>To present a case study</b>	To present a verbal case study in a professional manner to a clinical group	<p><i>Verbal presentation is delivered intelligibly and comprehensibly</i></p> <p><i>Discussion of the verbal presentation indicates adequacy of Trainee's knowledge and understanding</i></p>
<b>To develop professional independence</b>	To be able to engage in clinically supervised psychotherapy with one or more patients	<p><i>To have engaged with a patient on an individual basis</i></p> <p><i>Clinical supervision sessions attended</i></p> <p><i>Taped sessions presented and discussed with clinical supervisor</i></p>
<b>To participate in supervised individual psychotherapy</b>	To demonstrate capacity for open reflection regarding therapeutic issues for patients	<i>Understanding of unconscious process, transference dynamics and the intersubjective space in therapy.</i>
<b>To participate in supervised group psychotherapy</b>	Capacity to work in a group reflecting on psychodynamic psychotherapy processes	<i>Engage and fully participate in group.</i>
<b>Analytical observation</b>	Mother/infant study (18 months)	<i>Study commences under supervisor's supervision</i>
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Personal reflective diary (first 6 months)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Tutorial presentations (x3)</li> <li>• Small group (weekly)</li> <li>• Case study: verbal presentation: (approximately three months after beginning to work individually with a patient, at the discretion of the supervisor).</li> </ul>	

## Training Year Two: Objectives and Learning Outcomes

Objectives	Learning Outcomes	Performance Indicators (Standard: all required)
<b>To continue to engage in a study of psychotherapeutic theory</b>	To demonstrate increased knowledge of psychotherapeutic theory	<i>Attends seminar series and tutorials and fulfils assessment requirements Staff discussions indicate Trainee's adequacy</i>
<b>To attend and participate in reflective clinical meetings</b>	To recognise the importance of meetings and attempt to use them effectively	<i>Attends meetings regularly Offers reasoned comment/information/critiques in a manner accepted by the participants as professionally appropriate</i>
<b>To behave in a professional and ethical manner</b>	To understand and adhere to codes of ethical practice	<i>No complaint of a breach of ethics has been upheld or remains unresolved</i>
<b>To be a reflective student/practitioner</b>	To maintain a record of personal development and progress	<i>Supervisor affirms effectiveness of supervision process</i>
<b>To observe carefully and accurately</b>	To carry out an analytical observation and record it	<i>Written Mother/infant observation study assessed as "pass"</i>
<b>To present a written case study</b>	To present a written case study in a professionally structured and comprehensive manner	<i>Written case presentation is assessed as "pass"</i>
<b>To orally present a case study</b>	To professionally present a verbal case study to a clinical group	<i>Verbal presentation is delivered intelligibly and comprehensibly following a standard format Discussion of the verbal presentation indicates adequate knowledge and understanding</i>
<b>To develop professional independence</b>	To be able to engage with one or more clients in psychotherapy, under supervision	<b>EITHER</b> <i>To have engaged in a long-term intensive therapeutic relationship with an individual client</i> <b>OR</b> <i>To have engaged several clients in long-term therapeutic relationships</i>
<b>To participate in supervised individual psychotherapy</b>	To demonstrate capacity for open reflection regarding therapeutic issues for patients	<i>Understanding of unconscious process, transference dynamics, and the intersubjective space in therapy</i>
<b>To participate in supervised group psychotherapy</b>	Capacity to work in a group reflecting on psychodynamic psychotherapy processes	<i>Engage and fully participate in group</i>
<b>Analytical observation</b>	<ul style="list-style-type: none"> <li>• Mother/infant study (18 months)</li> </ul>	<i>Study concludes: write-up assessed as "pass."</i>
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Case study written case presentation: (June)</li> <li>• Case study verbal presentation: (July/August)</li> <li>• Seminar series: essays x2 (June/October)</li> <li>• Mother/infant observation write-up (December).</li> </ul>	

## Training Year Three: Objectives and Learning Outcomes

Objectives	Learning Outcomes	Performance Indicators (Standard: all required)
<b>To engage in an extended study of the theory of psychotherapy</b>	Theoretical knowledge is formally demonstrated	<i>Attends seminar series and tutorials and fulfils series assessment requirements Seminar series major essay is assessed as “pass”</i>
<b>To attend and participate in reflective clinical meetings</b>	To recognise the importance of meetings and use them effectively	<i>Attends meetings regularly Offers comment/information/critiques in a manner accepted by the participants as professionally appropriate and accurate</i>
<b>To behave in a professional and ethical manner</b>	To understand and adhere to codes of ethical practice	<i>No complaint of a breach of ethics has been upheld or remains unresolved</i>
<b>To observe carefully and accurately</b>	To carry out a clinical observation and record it	<i>Group work write-up assessed as a “pass”</i>
<b>To present a written case study</b>	To present a written case study in a professionally structured and comprehensive manner	<i>Written assignment is judged a “pass”</i>
<b>To verbally present a case study</b>	To present a verbal case study to a clinical critique group	<i>Verbal presentation is delivered intelligibly and comprehensibly following a standard format Discussion of the verbal presentation indicates knowledge and understanding</i>
<b>To develop professional independence</b>	To competently engage in psychotherapy with one or more clients	<i>To have engaged in a long-term intensive therapeutic relationship with a client on an individual basis To have engaged several clients in long-term therapeutic relationships To have engaged in supervision effectively</i>
<b>To participate in supervised individual psychotherapy</b>	To demonstrate capacity for open reflection regarding therapeutic issues for patients	<i>Understanding of unconscious process, transference dynamics, and the intersubjective space in therapy</i>
<b>To participate in supervised group psychotherapy</b>	Capacity to work in a group reflecting on psychodynamic psychotherapy processes	<i>Engage and fully participate in group</i>
<b>To develop safe professional autonomy</b>	To conform to standards of professional ethics which ensure client safety and confidentiality	<i>Adopt and maintain a professional ethical code, eg. NZAP Conform to ethical workplace practices Supervisor attests to regular and effective use of supervision</i>
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Case study – verbal presentation (March/April)</li> <li>• Group Work Write-up (July)</li> <li>• Seminar series: essays x2 (June/October)</li> <li>• Seminar series: Long Essay abstract and essay (December).</li> </ul>	

## Training in the Theory of Psychotherapy

In Year One of training, trainees engage in psychotherapy tutorials and group discussions as part of hospital-wide training in basic psychotherapeutic ideas and principles and offers professional training opportunities for several groups of staff. Year One trainees audit the series and present up to three tutorials in the programme as part of their formal assessment for the year.

In Years Two and Three, trainees engage in *The Advanced Theory of Psychotherapy Modular Series*. This is a collection of four modules offered to staff and the public (on a fee-paying basis). Each module has ten 90-minute seminars delivered on Tuesday evenings. Two modules are offered each year and attendance at four modules over two years is required of senior trainees in the programme. An essay assessment ends each module, and a fifth – longer – essay assessment is required to achieve the *Certificate of Completion of the Advanced Theory of Psychotherapy Modular Series*, which is a prerequisite for completion of the traineeship.

The topics in each module undergo revision by the Education Committee each year, but the current topic outline form is listed in the ATPM handbook on the Ashburn Clinic website: <https://www.ashburn.co.nz/wp-content/uploads/2021/05/00077c-Ashburn-ATPMS-Handbook-October-2020-4.pdf>

# CONDUCT AND DISCIPLINARY POLICIES AND PROCEDURES

## General Conduct Policy

Trainee Psychotherapists, by accepting their place in the programme and becoming employees of Ashburn Clinic, agree to subject themselves to Ashburn Clinic's codes of conduct and ethics.

In brief, these codes require all employees to:

- Consider the health and well-being of the patient to be their first priority
- Strive to continuously improve their skills and knowledge for the benefit of the patients
- Recognise their own personal limitations
- Recognise the complementary skills of others
- Protect the confidentiality of all patient information even after the death of a patient
- Carry out their work to the best of their ability, with compassion and respect for human dignity
- Ensure that their personal conduct at work is above reproach
- Take no physical, emotional, financial or sexual advantage of any patient
- Abide by the specific codes of ethics of professional associations relevant to the tasks undertaken during their work.

In general, professional ethical standards for psychotherapy trainees conform to those adopted by the New Zealand Association of Psychotherapists and will no doubt also conform to the standards adopted by The Psychotherapists Board of Aotearoa New Zealand.

## General Disciplinary Policy and Complaints Procedures

Trainee Psychotherapists, by accepting their place in the programme and becoming employees of Ashburn Clinic, agree to subject themselves to Ashburn Clinic's employee, disciplinary and complaints procedures. For more information, refer to the *Ashburn Clinic Employee Handbook*.

## Appeals Against Disciplinary Procedures

If a disciplinary matter regarding conduct remains unresolved or in dispute, a Trainee can directly appeal to the Education Committee, the Medical Director, the Board of Trustees of the Ashburn Hall Charitable Trust, or contact an outside body such as the Office of the Ombudsman, Disputes Tribunal, or invoke Personal Grievance proceedings in the Employment Court.

If a disciplinary matter regarding ethical conduct remains unresolved or in dispute, a Trainee can directly appeal to the Education Committee, the Medical Director, the Board of Trustees of the Ashburn Hall Charitable Trust, or contact an outside professional body such as the New Zealand Association of Psychotherapists or the Psychotherapists Board of Aotearoa New Zealand for advice.

## INTRODUCTION – ASSESSMENT

This section outlines the assessment requirements for Trainee Psychotherapists participating in the three-year training programme at Ashburn Clinic, Dunedin.

Trainees are advised that assessments are best regarded as *formative* in nature rather than *summative*, meaning that a successful assessment does not imply the end of a phase of training nor mastery of a set of skills. Assessments may be varied during a programme because the clear intention of the Education Committee is to commence the development of an individual psychotherapist, and that assessment is used as a tool to gauge the breadth and depth of the progress of the individual. It is an open-ended process.

### Unit Attachments

Unit placement is assigned by the Education Committee annually.

<b>Facilitator</b>	Charge Nurse for the unit
<b>Supervisor</b>	Psychotherapist from Ashburn Clinic senior staff (whole year)
<b>Attendances required</b>	<ul style="list-style-type: none"> <li>• Daily unit meetings</li> <li>• Clinical team meetings</li> <li>• Morning/afternoon staff meetings</li> <li>• Weekly Community Forum</li> <li>• Weekly Med/Psych team meeting</li> <li>• Weekly Group Supervision for psychiatric/psychotherapeutic staff</li> <li>• Weekly personal supervision</li> <li>• Weekly Staff Group meeting</li> <li>• Monthly Supervisor interview</li> </ul>
<b>Theoretical training</b>	<ul style="list-style-type: none"> <li>• Seminars, tutorials and associated readings</li> <li>• Further as indicated by Charge Nurse and Supervisor</li> </ul>
<b>Clinical practice training</b>	<ul style="list-style-type: none"> <li>• Arranged by Charge Nurse, Supervisor</li> <li>• Arranged as requested by Trainee under supervision</li> <li>• As a supported co-therapist in small group</li> <li>• As a clinically supervised autonomous therapist</li> </ul>
<b>Opportunities</b>	<ul style="list-style-type: none"> <li>• Participation in art, music, family groups</li> <li>• Invitation to join library committee</li> </ul>
<b>Clinical practice case load: year 1</b>	<ul style="list-style-type: none"> <li>• One or more individuals in psychotherapy</li> <li>• Group therapy</li> </ul>
<b>Clinical practice case load: year 2</b>	<ul style="list-style-type: none"> <li>• 3-5 individuals in psychotherapy</li> <li>• Group therapy</li> </ul>
<b>Clinical practice case load: year 3</b>	<ul style="list-style-type: none"> <li>• 5-8 individuals in psychotherapy</li> <li>• Group therapy</li> </ul>

## Summary of Assessment

Including:

- Tutorial series seminar presentations
- Advanced Theory of Psychotherapy Modules.

Year 1	Assessment Summary
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Personal reflective diary (first 6 months)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Tutorial presentations (x 3)</li> <li>• Case study – oral presentation: (approximately three months after beginning to work individually with a patient, at the discretion of the Supervisor)</li> </ul>
Year 2	Assessment Summary
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Group tutorial meetings (weekly)</li> <li>• ATPM* Series: essays x 2</li> <li>• Case study – written case presentation: (June)</li> <li>• Case study – oral presentation: (July/August)</li> <li>• Mother/infant observation write-up (December)</li> </ul>
Year 3	Assessment Summary
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Case study – oral presentation (March/April)</li> <li>• ATPM* Series: essays x 2</li> <li>• ATPM Series: proposal (November)</li> <li>• ATPM Series: Long Essay (December)</li> <li>• Group Work Write-up (July)</li> </ul>

\* ATPM: Advanced Theory of Psychotherapy Modular Seminar Series

## IN-HOUSE ASSESSMENTS (excluding ATPM seminar assessments)

### YEAR ONE

Year 1	Assessment Summary
Assessment points	<ul style="list-style-type: none"> <li>Supervisor meetings (weekly)</li> <li>Personal reflective diary (first 6 months)</li> <li>Group tutorial meetings (weekly)</li> <li>Tutorial presentations (x 3)</li> <li>Case study – oral presentation: (approximately three months after beginning to work individually with a patient, at the discretion of the Supervisor)</li> </ul>

**Task:** Attend Weekly Group Tutorials

**Level:** Psychotherapy Trainee: Year One

**Due date:** December

**Purpose:** To participate in a group process facilitating a learning reflective engagement with others related to psychotherapeutic dynamics: theory and practice at Ashburn Clinic.

Task objective	Learning Outcome	Performance Indicators (Standard: all to be achieved)	Range of assessment outcomes
To be a reflective student/practitioner	To demonstrate and develop a capacity for reflective process and open engagement in a group process related to psychotherapeutic practice at Ashburn Clinic.	<ul style="list-style-type: none"> <li>Regular attendance.</li> <li>Open and active participation and contributions to tutorial discussions.</li> </ul>	<p>Pass</p> <p>Resubmit</p> <p>Fail</p>

**Assessed by** the Group facilitator, Supervisor and Trainee in training.

#### Task: Tutorial Presentation

The Year 1 Trainee has the task of presenting **THREE tutorials** in the Tutorial Training series.

Trainees are encouraged to **consult with their Supervisor** and also the **Co-Ordinator of the Tutorial Series** for guidance on how to present a paper and to discover what resources are available to assist them.

Trainees should **carefully read the Assessment Schedule** for Tutorial Presentations in the appropriate section of this handbook. The assessment statements are designed to be self-explanatory and to provide both a plan and afterwards a degree of immediate feedback to the presenting Trainee.

**The purpose** of the presentation is to help the Trainee focus their attention on the

**application of theory to the Ashburn workplace.** As such, the concept of "pass/fail" is not absolutely applicable, since the aim of the year is not to *pass tests* but to *become proficient*. Trainees may expect that staff will suggest ways to assist them to develop proficiency as a result of their auditing of the Trainee's presentation.

Trainees may be invited to present more than three tutorials during their first year. Please discuss the appropriateness of such an invitation with your supervisor before accepting.

All staff are held available to be invited to present a tutorial, and once they have progressed beyond their first year, Trainees will be invited to participate as presenters in their turn. Such presentations will normally not be assessed, but participation in assessed mode is a matter for discussion with the Supervisor.

Please proceed now to **read the attached assessment schedule.**

**Task:** Personal Reflective Diary (first 6 months)

**Level:** Psychotherapy Trainee: Year One

**Due date:** July

**Purpose:** To maintain a record of personal learning and adaptation to the tasks and processes of psychotherapy within the training programme at Ashburn Clinic.

Task objective	Learning Outcome	Performance Indicators (Standard: all to be achieved)	Range of assessment outcomes
To be a reflective student/practitioner	To create a record of personal development and progress	<ul style="list-style-type: none"> <li>Diary is regularly updated</li> <li>Diary is personally reflective</li> <li>Diary is discussed with Supervisor</li> </ul>	<b>Pass</b> <b>Resubmit</b> <b>Fail</b>

**Assessed by:** Supervisor and Trainee in consultation.

**Moderation provided by:** appeal process.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

**Appeal:** trainees may appeal a “resubmit” or “fail” outcome directly to the Education Committee.

Notes on resubmissions:

- The Supervisor will provide guidance to the Trainee during the resubmission process.
- Trainees invited to resubmit an assessment task will have access to all assessment schedules used by primary assessors during their deliberations as well any formal

comments provided by assessors.

- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one resubmission of an assessed task.

### Task Notes: Diary (Year One)

The Trainee is tasked with keeping a daily work diary for the first six months of training.

The diary will act as an aid to learning and to the process of adaptation to a complex new role and to the psychotherapy frame within the therapeutic community setting.

It may provide a focus for the identification of areas where coaching and information are needed.

It may also be a record of psychological and emotional responses.

The diary may usefully be taken to supervision and tutorial group meetings, but its content will not be evaluated formally.

**Task:** Oral Presentation: Case Study

**Level:** Psychotherapy Trainee: Year One only

**Length:** About ½ hour in presentation followed by ½ hour in discussion with assessment panel.

**Due date:** By arrangement (delivered approximately three months after beginning to work individually with a patient, at the discretion of the Supervisor).

**Purpose:** To present a current psychotherapy inpatient case to a panel appointed for the purpose by the Education Committee and demonstrate an understanding of presentation format and underlying psychotherapeutic ideas applied to formulation.

Task Objectives	Learning Outcomes	Performance indicators (Standard: all to be achieved)	Range of assessment outcomes
To present a case study using a prescribed format	To present and discuss a case study with a clinical group in a professional manner	<ul style="list-style-type: none"> <li>• All sections of the case presentation are addressed</li> <li>• Information under each heading is communicated clearly</li> <li>• Trainee displays ability to gather relevant developmental information using the patient's file and own history-taking during therapy sessions</li> <li>• Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li> <li>• Trainee displays ability to comment on the process of therapy, the nature</li> </ul>	<p><b>Pass</b></p> <p><b>Re-present</b></p> <p><b>Fail</b></p>

		<p>of the working alliance, and developing transference</p> <ul style="list-style-type: none"> <li>• The Trainee demonstrates understanding of their personal dynamics in the counter-transference</li> <li>• The Trainee demonstrates awareness of unconscious processes</li> <li>• The Trainee manages the time constraints of the presentation</li> <li>• The Trainee is able to address questions and suggestions from the examining panel in an insightful way</li> </ul>	
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**Assessment:** three senior staff members of the Ashburn Clinic will act as an assessment panel in the following process:

1. An outcome will be achieved by consensus among the panel members.
2. If a consensus is unable to be achieved, then an outcome will be determined by majority vote.

An outcome will apply to the whole of the oral presentation except that, by consensus or majority decision, assessment panel members may select aspects of a presentation and invite the Trainee to re-present material related to those sections alone.

**Moderation provided by:** application of step 2 of this assessment process or by appealing to the Education Committee.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

**Appeal:** Trainees may appeal a “*resubmit*” or “*fail*” outcome directly to the Education Committee.

Notes on re-presentations:

- The Supervisor will provide guidance to the Trainee during the re-presentation process.
- Trainees invited to re-present an assessment task will have access to all assessment schedules used by primary assessors during their deliberations as well as any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one re-presentation of an assessed task.

**Task Notes: Oral Case Presentation**

The Trainee will be asked to present a current psychotherapy case to a panel assigned for the purpose by the Education Committee.

One hour in total is allocated for the task. The oral presentation should take 25-30 minutes, leaving the rest of the hour for discussion of the case between the Trainee and the members of the panel.

The Trainee is tasked with presenting a current psychotherapy inpatient case to a panel to demonstrate an understanding of presentation format and the underlying psychotherapeutic ideas applied by the Trainee to the formulation.

Timing of the presentation will depend on how soon the Trainee starts to see patients and should be negotiated between the Supervisor and Trainee.

The following format should be used:

- Case identification and personal information, mode of referral, presenting problems and symptoms
  - Psychiatric diagnoses and medications
  - Developmental history
  - Psychodynamic formulation, using one or more of the theories studied in the seminar series which are familiar to the Trainee and relevant to the case
  - Course of therapy, giving a brief account of work to date, highlighting themes and issues and with a particular focus on transference and counter transference
  - Termination – citing markers towards termination and evaluating remaining essential work.
- ..and so on.

**Task:** **Mother/Infant Observation Write-up**

**Level:** **Psychotherapy Trainee: Years One and Two**

**Length:** Up to 10,000 words

**Due date:** December of Year Two

**Purpose:** To demonstrate a Trainee’s ability to observe interactions and record an analytical summary of the infant’s physical, cognitive and emotional development, in the context of the developing mother-infant interaction and relationship and their place in the wider family.

<b>Task Objectives</b>	<b>Learning Outcomes</b>	<b>Performance indicators (Standard: all to be achieved)</b>	<b>Range of assessment outcomes</b>
To carry out an analytical observation and record it	To observe interactions and record an analytical summary of an infant’s physical, cognitive and emotional development	<ul style="list-style-type: none"> <li>• Write-up provides a clear account of the observational task</li> <li>• Summary of the infant’s physical, cognitive and emotional development identifies stages and comments on how they conform to accepted norms</li> <li>• Trainee charts the patterns of developing mother/infant interactions</li> <li>• Trainee demonstrates an understanding of the interconnection between physical, cognitive and emotional development</li> </ul>	<p><b>Pass</b></p> <p><b>Resubmit</b></p> <p><b>Fail</b></p>

		<ul style="list-style-type: none"> <li>• Trainee uses vignettes to illustrate theoretical concepts</li> <li>• Trainee includes reference to the wider family unit and its role, as well as the role of the family's social environment</li> <li>• Trainee provides an account of his/her experiences in the observer role, including unconscious process</li> <li>• Trainee makes reference to material presented in the seminar series</li> <li>• Trainee achieves the word limit</li> </ul>	
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**Assessment:** the Medical Director and Supervisor act as primary assessors in the following process:

1. If the Medical Director and Supervisor together assign a “Pass”, no further review is required.
2. If either of the Medical Director or Supervisor assigns a “Resubmit” or “Fail” outcome, the task will be independently reviewed by a senior clinician of the Ashburn Clinic and a consensus outcome will be attempted between these three assessors and, if achieved, applied.
3. If no consensus is achieved, a fourth senior clinician from the staff of Ashburn Clinic will independently review the assessed task. All four assessors will then attempt a consensus outcome and, if achieved, apply it.
4. If no outcome is agreed by consensus, the task and deliberations of all assessors will be reviewed by an external moderator who will independently assign an outcome to the assessed task.

**Moderation provided by:** application of steps 2, 3, and 4 of the assessment process.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

**Appeal:** Trainees may appeal a “*resubmit*” or “*fail*” outcome directly to the Education Committee.

Notes on resubmissions:

- The Supervisor will provide guidance to the Trainee during the resubmission process.
- Trainees invited to resubmit an assessment task will have access to all assessment schedules used by primary assessors during their deliberations as well as any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one resubmission of an assessed task.

**Task Notes: Mother/Infant Observation Write-Up**

10,000 words limit: due in December of year two training.

The Mother/Infant observation is a 12-18-month longitudinal study of the development of an infant and the relationship of the infant to its mother, and of the mother to the infant.

The Trainee is tasked with observing the infant's physical, cognitive and emotional development within in the context of the developing mother-infant interaction and relationship and the infant's place in the wider family.

Particular attention should be paid to the developing patterns of personality, including defences. The study should connect observations with theory. It should also provide an account of the observer's experience.

At the conclusion of the observation, a Trainee will provide a write-up of the observation which demonstrates the Trainee's ability to observe interactions and record an analytical summary of the information gleaned during the observation.

Furthermore, it is expected that these observations and analyses will be placed within the context of the Trainee's relevant theoretical and practical training to date, derived from the Ashburn Programme or elsewhere.

Trainees are advised to examine the performance indicators for this task carefully. They provide much of the detail of the final shape of the written record of the observation as well as a useful "map" for participating in the observation itself.

The Supervisor of each Trainee is responsible for overseeing the process of the observation and for guiding a Trainee during the observation itself. It is essential that the Trainee and Supervisor establish early a communication process which allows them to deal together with the practical matters of the observation, especially if the observation process becomes unstable or the observation itself becomes untenable or ceases prematurely.

## YEAR TWO

Year 2	Assessment Summary
Assessment points	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Case study written presentation: (June)</li> <li>• Case study oral presentation: (July/August)</li> <li>• Mother/infant observation write-up (December).</li> </ul>

**Task:** Written Case Presentation

**Level:** Psychotherapy Trainee: Year Two only

**Length:** 5,000-6,000 words

**Due date:** June

**Purpose:** The Trainee will demonstrate competence in writing up his/her work with an inpatient or day patient, using the same format as for the oral case presentation.

Task Objectives	Learning Outcomes	Performance indicators (Standard: all to be achieved)	Range of assessment outcomes
To present a written case study in a professionally structured and comprehensive manner	To demonstrate competence in providing a written case study following a nominated format	<ul style="list-style-type: none"> <li>• All sections of the case presentation are addressed</li> <li>• Information under each heading is communicated clearly</li> <li>• Trainee displays ability to gather relevant developmental information using the patient's file and own history-taking during therapy sessions</li> <li>• Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li> <li>• Trainee displays ability to comment on the process of therapy, the nature of the working alliance, and developing transference</li> <li>• The Trainee demonstrates understanding of their personal dynamics in the countertransference</li> <li>• The Trainee demonstrates awareness of unconscious processes</li> <li>• The Trainee manages the word limits of the presentation</li> </ul>	<p>Pass</p> <p>Re-present</p> <p>Fail</p>

**Assessment:** the Medical Director and Supervisor act as primary assessors in the following process:

1. If the Medical Director and Supervisor together assign a "Pass", no further review is required.
2. If either of the Medical Director or Supervisor assigns a "Resubmit" or "Fail" outcome, the task will be independently reviewed by a senior clinician of the Ashburn Clinic and a consensus outcome will be attempted between these three assessors and, if achieved,

applied.

3. If no consensus is achieved, a fourth senior clinician from the staff of the Ashburn Clinic will independently review the assessed task. All four assessors will then attempt a consensus outcome and, if achieved, apply it.
4. If no outcome is agreed by consensus, the task and deliberations of all assessors will be reviewed by an external moderator who will independently assign an outcome to the assessed task.

**Moderation provided by:** application of steps 3 and 4 of the assessment process.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

**Appeal:** Trainees may appeal a “*resubmit*” or “*fail*” outcome directly to the Education Committee.

Notes on resubmissions:

- The Supervisor will provide guidance to the Trainee during the resubmission process.
- Trainees invited to resubmit an assessment task will have access to all assessment schedules used by assessors during their deliberations as well any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one resubmission of an assessed task.

### **Task Notes: Written Case Presentation (Year Two)**

The Trainee will demonstrate competence in writing up his/her work with an inpatient or day patient, using the same format as for the oral case presentation.

The Trainee is asked to present a written case study in a professionally structured and comprehensive manner in 5000-6000 words.

The task should be presented by the end of June.

The following information should be included:

- Case identification and personal information, mode of referral, presenting problems and symptoms.
- Psychiatric diagnoses and medications.
- Developmental history.
- Psychodynamic formulation, using one or more of the theories studied in the seminar series which are familiar to the Trainee and relevant to the case.
- Course of therapy, giving a brief account of work to date, highlighting themes and issues and with a particular focus on transference and countertransference.
- Termination – citing markers towards termination and evaluating remaining essential work.

**Task:** Oral Presentation: Case Study

**Level:** Psychotherapy Trainee: Years Two and Three only

**Length:** About ½ hour in presentation followed by ½ hour in discussion with assessment panel.

**Due date:** By arrangement Year 2 - August/September

Year 3 - March/April

**Purpose:** To present a current psychotherapy inpatient case to a panel appointed for the purpose by the Education Committee and demonstrate an understanding of presentation format and underlying psychotherapeutic ideas applied to formulation.

Task Objectives	Learning Outcomes	Performance indicators (Standard: all to be achieved)	Range of assessment outcomes
To present a case study using a prescribed format	To present and discuss a case study with a clinical group in a professional manner	<ul style="list-style-type: none"><li>All sections of the case presentation are addressed</li><li>Information under each heading is communicated clearly</li><li>Trainee displays ability to gather relevant developmental information using the patient's file and own history-taking during therapy sessions</li><li>Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li><li>Trainee displays ability to comment on the process of therapy, the nature of the working alliance, and developing transference</li><li>The Trainee demonstrates understanding of their personal dynamics in the countertransference</li><li>The Trainee demonstrates awareness of unconscious processes</li><li>The Trainee manages the time constraints of the presentation</li><li>The Trainee is able to address questions and suggestions from the examining panel in an insightful way</li></ul>	<p>Pass</p> <p>Re-present</p> <p>Fail</p>

**Assessment:** three senior staff members of the Ashburn Clinic will act as an assessment panel in the following process:

1. An outcome will be achieved by consensus among the panel members.
2. If a consensus is unable to be achieved, then an outcome will be determined by majority vote.

An outcome will apply to the whole of the oral presentation except that, by consensus or majority decision, assessment panel members may select aspects of a presentation and invite the Trainee to re-present material related to those sections alone.

**Moderation provided by:** application of step 2 of this assessment process or by appealing to the Education Committee.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee.
- act to identify and respond to the needs of a Trainee.
- take other action appropriate to the remediation of the failure of the Trainee.
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

**Appeal:** Trainees may appeal a “*resubmit*” or “*fail*” outcome directly to the Education Committee.

Notes on re-presentations:

- The Supervisor will provide guidance to the Trainee during the re-presentation process.
- Trainees invited to re-present an assessment task will have access to all assessment schedules used by primary assessors during their deliberations as well any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one re-presentation of an assessed task.

### **Task Notes: Oral Case Presentation**

The Trainee will be asked to present a current psychotherapy case to a panel assigned for the purpose by the Education Committee.

One hour in total is allocated for the task. The oral presentation should take 25-30 minutes, leaving the rest of the hour for discussion of the case between the Trainee and the members of the panel.

The Trainee is tasked with presenting a current psychotherapy inpatient case to a panel to demonstrate an understanding of presentation format and the underlying psychotherapeutic ideas applied by the Trainee to the formulation.

The following format should be used:

- Case identification and personal information, mode of referral, presenting problems and symptoms.
- Psychiatric diagnoses and medications.
- Developmental history.
- Psychodynamic formulation, using one or more of the theories studied in the seminar series which are familiar to the Trainee and relevant to the case.
- Course of therapy, giving a brief account of work to date, highlighting themes and issues and with a particular focus on transference and countertransference.
- Termination – citing markers towards termination and evaluating remaining essential work.

## YEAR THREE

Year 3	Assessment Summary
<b>Assessment points</b>	<ul style="list-style-type: none"> <li>• Supervisor meetings (weekly)</li> <li>• Group tutorial meetings (weekly)</li> <li>• Case study oral presentation: (March/April)</li> <li>• Mother/infant observation write-up (December).</li> </ul>

**Task:** **Mother-Infant Observation Write-Up**

**Level:** **Psychotherapy Trainee: Years One and Two**

**Length:** Up to 10,000 words

**Due date:** December of Year Two

**Purpose:** To demonstrate a Trainee's ability to observe interactions and record an analytical summary of the infant's physical, cognitive and emotional development, in the context of the developing mother-infant interaction and relationship and their place in the wider family.

Task Objectives	Learning Outcomes	Performance indicators ( <i>Standard: all to be achieved</i> )	Range of assessment outcomes
To carry out an analytical observation and record it	To observe interactions and record an analytical summary of an infant's physical, cognitive and emotional development	<ul style="list-style-type: none"> <li>• Write-up provides a clear account of the observational task</li> <li>• Summary of the infant's physical, cognitive and emotional development identifies stages and comments on how they conform to accepted norms</li> <li>• Trainee charts the patterns of developing mother/infant interactions</li> <li>• Trainee demonstrates an understanding of the interconnection between physical, cognitive and emotional development</li> <li>• Trainee uses vignettes to illustrate theoretical concepts</li> <li>• Trainee includes reference to the wider family unit and its role, as well as the role of the family's social environment</li> <li>• Trainee provides an account of his/her experiences in the observer role, including unconscious process</li> <li>• Trainee makes reference to material presented in the seminar series</li> <li>• Trainee achieves the word limit</li> </ul>	<p><b>Pass</b></p> <p><b>Resubmit</b></p> <p><b>Fail</b></p>

**Assessment:** the Medical Director and Supervisor act as primary assessors in the following process:

1. If the Medical Director and Supervisor together assign a "Pass", no further review is

required.

2. If either of the Medical Director or Supervisor assigns a “Resubmit” or “Fail” outcome, the task will be independently reviewed by a senior clinician of the Ashburn Clinic and a consensus outcome will be attempted between these three assessors and, if achieved, applied.
3. If no consensus is achieved, a fourth senior clinician from the staff of the Ashburn Clinic will independently review the assessed task. All four assessors will then attempt a consensus outcome and, if achieved, apply it.
4. If no outcome is agreed by consensus, the task and deliberations of all assessors will be reviewed by an external moderator who will independently assign an outcome to the assessed task.

**Moderation provided by:** application of steps 2, 3, and 4 of the assessment process.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

### **Appeal**

Trainees may appeal a “*resubmit*” or “*fail*” outcome directly to the Education Committee.

Notes on resubmissions:

- The Supervisor will provide guidance to the Trainee during the resubmission process.
- Trainees invited to resubmit an assessment task will have access to all assessment schedules used by primary assessors during their deliberations as well any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one resubmission of an assessed task.

### **Task Notes: Mother-Infant Observation Write-Up**

10,000 words limit: due in December of Year Two training.

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The Mother/ Infant observation is a 12-18-month longitudinal study of the development of an infant and the relationship of the infant to its mother, and of the mother to the infant.

The Trainee is tasked with observing the infant’s physical, cognitive and emotional development within in the context of the developing mother-infant interaction and relationship and the infant’s place in the wider family.

Particular attention should be paid to the developing patterns of personality, including defences. The study should connect observations with theory. It should also provide an account of the observer’s experience.

At the conclusion of the observation, a Trainee will provide a write-up of the observation which demonstrates the Trainee’s ability to observe interactions and record an analytical summary of the information gleaned during the observation.

Furthermore, it is expected that these observations and analyses will be placed within the context of the Trainee's relevant theoretical and practical training to date, derived from the Ashburn Programme or elsewhere.

Trainees are advised to examine the performance indicators for this task carefully. They provide much of the detail of the final shape of the written record of the observation as well as a useful "map" for participating in the observation itself.

The Supervisor of each Trainee is responsible for overseeing the process of the observation and for guiding a Trainee during the observation itself. It is essential that the Trainee and Supervisor establish early a communication process which allows them to deal together with the practical matters of the observation, especially if the observation process becomes unstable or the observation itself becomes untenable or ceases prematurely.

**Task:** Oral Presentation: Case Study

**Level:** Psychotherapy Trainee: Years Two and Three only

**Length:** About ½ hour in presentation: followed by ½ hour in discussion with assessment panel.

**Due date:** By arrangement Year Two - August/September  
Year Three - March/April

**Purpose:** To present a current psychotherapy inpatient case to a panel appointed for the purpose by the Education Committee and demonstrate an understanding of presentation format and underlying psychotherapeutic ideas applied to formulation.

Task Objectives	Learning Outcomes	Performance indicators (Standard: all to be achieved)	Range of assessment outcomes
To present a case study using a prescribed format	To present and discuss a case study with a clinical group in a professional manner	<ul style="list-style-type: none"><li>All sections of the case presentation are addressed</li><li>Information under each heading is communicated clearly</li><li>Trainee displays ability to gather relevant developmental information using the patient's file and own history-taking during therapy sessions</li><li>Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li><li>Trainee displays ability to comment on the process of therapy, the nature of the working alliance, and developing transference</li><li>The Trainee demonstrates understanding of their personal dynamics in the countertransference</li><li>The Trainee demonstrates awareness of unconscious processes</li><li>The Trainee manages the time constraints of the presentation</li><li>The Trainee is able to address questions and suggestions from the examining panel in an insightful way</li></ul>	<b>Pass</b> <b>Re-present</b> <b>Fail</b>

**Assessment:** three senior staff members of the Ashburn Clinic will act as an assessment panel in the following process:

1. An outcome will be achieved by consensus among the panel members.
2. If a consensus is unable to be achieved, then an outcome will be determined by majority vote.

An outcome will apply to the whole of the oral presentation except that, by consensus or majority decision, assessment panel members may select aspects of a presentation and invite the Trainee to re-present material related to those sections alone.

**Moderation provided by:** application of step 2 of this assessment process or by appealing to the Education Committee.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme or its assessment tasks.

**Appeal:** Trainees may appeal a “resubmit” or “fail” outcome directly to the Education Committee.

Notes on re-presentations:

- The Supervisor will provide guidance to the Trainee during the re-presentation process.
- Trainees invited to re-present an assessment task will have access to all assessment schedules used by primary assessors during their deliberations as well any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may at its discretion approve more than one re-presentation of an assessed task.

### **Task Notes: Oral Case Presentation**

The Trainee will be asked to present a current psychotherapy case to a panel assigned for the purpose by the Education Committee.

One hour in total is allocated for the task. The oral presentation should take 25-30 minutes, leaving the rest of the hour for discussion of the case between the Trainee and the members of the panel.

The Trainee is tasked with presenting a current psychotherapy inpatient case to a panel to demonstrate an understanding of presentation format and the underlying psychotherapeutic ideas applied by the Trainee to the formulation.

The following format should be used:

- Case identification and personal information, mode of referral, presenting problems and symptoms.
- Psychiatric diagnoses and medications.
- Developmental history.
- Psychodynamic formulation, using one or more of the theories studied in the seminar series which are familiar to the Trainee and relevant to the case.
- Course of therapy, giving a brief account of work to date, highlighting themes and issues and with a particular focus on transference and countertransference.
- Termination – citing markers towards termination and evaluating remaining essential work.

**Task:** Group Work Write-up

**Level:** Psychotherapy Trainee: Year THREE Only

**Length:** 6,000 words

**Due date:** July

**Purpose:** To demonstrate participation as a co-therapist in a small psychotherapy group over a period of several months and to give a written account of this work.

Task Objectives	Learning Outcomes	Performance indicators (Standard: all to be achieved)	Range of assessment outcomes
To be able to carry out a clinical observation and record it	To observe carefully and accurately the functions, work and processes in a small psychotherapy group	<ul style="list-style-type: none"><li>All task headings are addressed</li><li>Information for each heading is communicated clearly</li><li>Trainee demonstrates understanding of theoretical concepts about group processes using brief vignettes to illustrate this</li><li>Trainee comments on the specific roles/functions of individual patient members, using vignettes to illustrate the point</li><li>Trainee displays understanding of separate and shared transference reactions to the facilitators</li><li>Trainee comments on personal countertransference reactions</li><li>Trainee is able to comment on issues arising in the work with a co-facilitator</li></ul>	<p>Pass</p> <p>Re-submit</p> <p>Fail</p>

**Assessment:** the Medical Director, the Supervisor and a senior staff member (normally to be the Charge Nurse for the relevant inpatient group) act as an assessment panel in the following process:

1. An outcome will be achieved by consensus among the panel members.
2. If a consensus is unable to be achieved, then an outcome will be determined by majority vote.

An outcome will apply to the whole of the written presentation except that, by consensus or majority decision, assessment panel members may select aspects of a presentation and invite the Trainee to re-present material related to those sections alone.

**Moderation provided by:** application of step 2 of this assessment process or by appealing to the Education Committee.

**Consequence of “fail” assessment:** the Education Committee, at its monthly review of the Trainee’s progress, may:

- act to respond to the identified needs of the Trainee
- act to identify and respond to the needs of a Trainee
- take other action appropriate to the remediation of the failure of the Trainee
- take other action appropriate to the remediation of the failure of the training programme

or its assessment tasks.

**Appeal:** Trainees may appeal a “resubmit” or “fail” outcome directly to the Education Committee.

Notes on resubmissions:

- The Supervisor will provide guidance to the Trainee during the resubmission process.
- Trainees invited to resubmit an assessment task will have access to all assessment schedules used by assessors during their deliberations as well any formal comments provided by assessors.
- Discrete sections of the task may be identified for resubmission.
- The Education Committee may, at its discretion, approve more than one resubmission of an assessed task.

**Task Notes: Group Work Write-Up (Year Three)**

The Trainee will demonstrate participation as a co-therapist in a small psychotherapy group over a period of several months and give a written account of this work.

This should be based upon participation in a small psychotherapy group.

The following matters should be addressed in this task:

- The frame (membership of the group, duration, limits etc)
- Role of the facilitators
- Material and themes
- The group process – including reference to theory
- Transference and countertransference.

## **ASSESSMENT SCHEDULES**

Current versions of the assessment schedules for tasks are attached and should be photocopied for use as required.

Electronic versions are available from the Education Co-ordinator.

## Year One Tutorial Presentation Assessment Schedule

<b>Date:</b>		<b>Topic:</b>	
<b>Continuity by:</b>		<b>Assessed Presenter:</b>	
<b>Assessor:</b>			

**Note to Assessor:**     *-please mark a statement for each aspect and write an item comment if you wish.*

*-please write a general comment at the end of the assessment schedule.*

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1. Your summary of the given text was:

**full and complete**

**incomplete, but still useful**

**incomplete but useful in places**

**incomplete and not useful**

*comment:* \_\_\_\_\_

---

2. You demonstrated that you

**clearly understood the text**

**understood most of the text**

**had an uncertain grasp of the ideas**

**did not understand most of the text**

*comment:* \_\_\_\_\_

---

3. The style in which you communicated your ideas was

**appropriate at all times**

**mostly appropriate**

**often not appropriate**

**mostly or always inappropriate**

*comment:* \_\_\_\_\_

---

4. Your ability to communicate ideas to an audience was perceived to be

**effective at all times**

**mostly effective**

**sometimes effective**

**often ineffective**

*comment:* \_\_\_\_\_

---

5. When you related the text to the practice at Ashburn Clinic, you demonstrated

**an effective understanding of textual ideas and Ashburn practice**

**an effective understanding of textual ideas but not Ashburn practice**

**an effective understanding of Ashburn practice but not the ideas in the text**

**a poor understanding of textual ideas and Ashburn practice**

*comment:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. When you set ideas from the text into the context of Ashburn Clinic, you

**correctly identified and compared textual ideas and Ashburn practice**

**identified and compared ideas, mostly correctly**

**identified and compared ideas, but your understanding of them was poor**

**could not identify or relevantly compare ideas**

*comment:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. During the discussion phase of the tutorial, your participation was

**effective**

**often effective**

**sometimes effective**

**not effective**

*comment:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>General Comments:</b>	
<b>Assessed by:</b>	
<b>Date:</b>	<b>Outcome:</b>

# Year One Personal Reflective Diary (first 6 months) Assessment Schedule

**Name:**

**Level:** **Psychotherapy Trainee: Year One**

**Purpose:** To maintain a record of personal learning and adaptation to the tasks and processes of psychotherapy within the training programme at the Ashburn Clinic.

Performance Indicators <i>(Standard: all required)</i>	Comment	Outcomes Pass Fail
<ul style="list-style-type: none"> <li>Diary is regularly updated</li> </ul>		
<ul style="list-style-type: none"> <li>Diary is personally reflective</li> </ul>		
<ul style="list-style-type: none"> <li>Diary has been discussed with Supervisor</li> </ul>		
<b>Comments:</b>		
<b>Assessed by:</b>		
<b>Date:</b>	<b>Outcome:</b>	

## Year One Oral Presentation: Case Study Assessment Schedule

**Name:**

**Level:**            **Psychotherapy Trainee: Year One only**

**Length:**            About ½ hr in presentation, ½ hr discussion with assessment panel

**Due date:**        By arrangement (delivered approximately three months after beginning to work individually with a patient, at the discretion of the Supervisor)

**Purpose/task objective:** to present a current psychotherapy inpatient case to a panel and demonstrate an understanding of presentation format and underlying psychotherapeutic ideas applied to formulation.

Performance indicators (Standard: all to be achieved)	Comments	Outcomes Pass Re-present Fail
<ul style="list-style-type: none"> <li>• All sections of the case presentation are addressed</li> <li>• Information under each heading is communicated clearly</li> </ul>		
<ul style="list-style-type: none"> <li>• Trainee displays ability to gather relevant developmental information using the patient's file and own history-taking during therapy sessions</li> </ul>		
<ul style="list-style-type: none"> <li>• Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li> </ul>		
<ul style="list-style-type: none"> <li>• Trainee displays ability to comment on the process of therapy, the nature of the working alliance, and developing transference</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee demonstrates understanding of their personal dynamics in the countertransference</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee demonstrates awareness of unconscious processes</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee manages the time constraints of the presentation</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee is able to address questions and suggestions from the examining panel in an insightful way</li> </ul>		

**Assessed by:**

**Date:**

**Outcome:**

*Are further comments attached separately?*

**YES**

**NO**

## Year One + Two Mother/Infant Observation Write-Up Assessment Schedule

**Name:**

**Level:** **Psychotherapy Trainee: Years One and Two**

**Length:** Up to 10,000 words

**Due date:** December (of year 2)

**Purpose:** to demonstrate a Trainee's ability to observe interactions and record an analytical summary of the infant's physical, cognitive and emotional development, in the context of the developing mother-infant interaction and relationship and their place in the wider family.

Performance indicators (Standard: all to be achieved)	Comments	Outcomes Pass Re-submit Fail
• Write-up provides a clear account of the observational task		
• Summary of the infant's physical, cognitive and emotional development identifies stages and comments on how they conform to accepted norms		
• Trainee charts the patterns of developing mother/infant interactions		
• Trainee demonstrates an understanding of the interconnection between physical, cognitive and emotional development		
• Trainee uses vignettes to illustrate theoretical concepts		
• Trainee includes reference to the wider family unit and its role, as well as the role of the family's social environment		
• Trainee provides an account of his/her experiences in the observer role, including unconscious process		
• Trainee makes reference to material presented in the seminar series		
• Trainee achieves the word limit		

**Assessed by:**

*Date:*

**Outcome:**

*Are further comments attached separately?*

**YES**

**NO**

## Year Two Written Case Study Assessment Schedule

**Name:**

**Level:** **Psychotherapy Trainee Year Two**

**Length:** 5,000-6,000 words

**Due date:** June

**Purpose:** the Trainee will demonstrate competence in writing up his/her work with an inpatient or day patient, using the same format as for the oral case presentation.

Performance indicators <i>(Standard: all to be achieved)</i>	Comment	Outcomes Pass Re-submit Fail
<ul style="list-style-type: none"> <li>All sections of the case presentation are addressed</li> </ul>		
<ul style="list-style-type: none"> <li>Information under each heading is communicated clearly</li> </ul>		
<ul style="list-style-type: none"> <li>Trainee gathers relevant developmental information using the patient's file and own history-taking during therapy sessions</li> </ul>		
<ul style="list-style-type: none"> <li>Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li> </ul>		
<ul style="list-style-type: none"> <li>Trainee displays ability to comment on the process of therapy, the nature of the working alliance, and developing transference</li> </ul>		
<ul style="list-style-type: none"> <li>The Trainee demonstrates awareness of unconscious processes</li> </ul>		
<ul style="list-style-type: none"> <li>The Trainee manages the word limits of the presentation</li> </ul>		

**Comments:**

**Assessed by:**

<b>Date:</b>	<b>Outcome:</b>
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## Year Two + Three Oral Presentation: Case Study Assessment Schedule

**Name:**

**Level:**            **Psychotherapy Trainee Years Two and Three**

**Length:**         **About ½ hr presentation, ½ hr in discussion with assessment panel**

**Due date:**      **Year 2 - August/ September (by arrangement)**  
                          **Year 3 - March/ April (by arrangement)**

**Purpose:** to present a current psychotherapy inpatient case study using a prescribed format and demonstrate an understanding of presentation format and underlying psychotherapeutic ideas applied to formulation.

Performance indicators <i>(Standard: all to be achieved)</i>	Comments	Outcomes Pass Re-submit Fail
<ul style="list-style-type: none"> <li>• All sections of the case presentation are addressed</li> </ul>		
<ul style="list-style-type: none"> <li>• Information under each heading is communicated clearly</li> </ul>		
<ul style="list-style-type: none"> <li>• Trainee displays ability to gather relevant developmental information using the patient's file and own history-taking during therapy sessions</li> </ul>		
<ul style="list-style-type: none"> <li>• Trainee displays ability to make a psychodynamic formulation using familiar theoretical concepts</li> </ul>		
<ul style="list-style-type: none"> <li>• Trainee displays ability to comment on the process of therapy, the nature of the working alliance, and developing transference</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee demonstrates understanding of their personal dynamics in the countertransference</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee demonstrates understanding of their personal dynamics in the countertransference</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee demonstrates awareness of unconscious processes</li> </ul>		
<ul style="list-style-type: none"> <li>• The Trainee manages the time constraints of the presentation</li> </ul>		

<ul style="list-style-type: none"> <li>• The Trainee is able to address questions and suggestions from the examining panel in an insightful way</li> </ul>		
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<b>Assessed by:</b>	
<b>Date:</b>	<b>Outcome:</b>

## Year Three Group Work Write-up Assessment Schedule

**Name:**

**Level:**        **Psychotherapy Trainee: Year Three only**

**Length:**      6,000 words

**Due date:**    July

**Purpose:** to carry out a clinical observation and record it, demonstrating participation as a co-therapist in a small psychotherapy group over a period of several months.

Performance indicators <i>(Standard: all to be achieved)</i>	Comments	Outcomes Pass Re-submit Fail
• All task headings are addressed		
• Information for each heading is communicated clearly		
• Trainee demonstrates understanding of theoretical concepts about group processes using brief vignettes to illustrate this		
• Trainee comments on the specific roles/functions of individual patient members, using vignettes to illustrate the point		
• Trainee displays understanding of separate and shared transference reactions to the facilitators		
• Trainee comments on personal countertransference reactions		
• Trainee is able to comment on issues arising in the work with a co-facilitator		
<i>Comments:</i>		
<i>Assessed by:</i>		
<i>Date:</i>	<i>Outcome:</i>	