|  |  |
| --- | --- |
| **Policy statement on Criteria Expected for Comparable Qualification** | |
| Practitioners applying via the Tertiary Pathway who have not completed an approved Masters level qualification in psychotherapy from a New Zealand University or a  New Zealand Training Institution will need to meet the Board’s Policy Criteria Expected of  a Comparable Qualification. This policy also applies to practitioners applying for registration using an overseas qualification.  Practitioners applying for registration via this policy must provide clear evidence that they meet the criteria listed below **and** the Board’s Psychotherapist Core Clinical Competencies. Practitioners are expected to clearly identify any courses taken as part of their formal qualification, or professional development courses post qualification that support Psychotherapist Clinical Competencies. Areas missing may be covered in a competence statement from a supervisor; approved by the Board[[1]](#footnote-1).  All practitioners must demonstrate knowledge and understanding of culturally informed practice especially in relation to working within the context of Te Tiriti o Waitangi and New Zealand society. | |
| **New Zealand Qualifications Authority (NZQA)**  Applicants may be asked to have their qualification verified by NZQA as being equivalent to a New Zealand Masters level qualification. However, an NZQA assessment does not guarantee that the applicant will meet Board requirements.  The Board notes that an NZQA assessment is limited: it is not profession specific, it does not consider clinical competence, cultural competence, and ethical standards of conduct to be observed by psychotherapists. The Board’s responsibilities in assessing a practitioner’s qualification and competence are much wider than just considering the qualification. An NZQA assessment can complement an application but it doesn’t guarantee eligibility for registration. | |
| Psychotherapist Scope of Practice requirements | **Practitioners must be able to provide evidence from**  **coursework of competence in the following:**   * Understanding oflifespan human development. * Theory of psychotherapeutic models. * Social and cultural dynamics * Awareness of cultural competencies and their own cultural identity and diversity of worldviews. * Research skills. * Professional development, including understanding of ethics and professional conduct. * A basic understanding of NZ law as it applies to the practice of psychotherapy. * Therapist self-care. * Development of psychotherapeutic skills, including evidence that they have an understanding of and competently apply knowledge of:   - Interpersonal dynamics.  - Coping mechanisms.  - Psychopathology and psychiatric disorders.  - A basic understanding of pharmaceuticals commonly used in the treatment of mental conditions.  - Effects of trauma and abuse (sexual, physical and psychological) or neglect.  - Establishing and maintaining a therapeutic alliance.  - Ability to reflect on own and others process.  - Listening and verbal skills.  - A range of effective and appropriate interventions.  - Assessment, formulation and treatment planning.  - Risk assessment and management.  - Managing the boundaries of time and space.  **Supervised clinical practice**  Competently uses supervision and other resources to improve practice. During training, there must be a minimum of two years of clinical practice with weekly supervision throughout at least one year. |
| Psychotherapist Scope of Practice with Child and Adolescent Psychotherapist Specialism requirements | **Note: In addition to the above, practitioners must be able to demonstrate knowledge of and competence in the following:**   * In-depth understanding of infant, child and adolescent development, including psychological, emotional, social cognitive and maturational development. * Knowledge of infant, child and adolescent mental health. * Knowledge of infant, child and adolescent psychological / psychiatric disorders. * Knowledge of learning disabilities / special educational needs. * Knowledge of developmental delays / developmental disruptions. * Understanding of the effects on children of abuse (sexual, physical and psychological) and trauma or neglect. * Understanding of multi-disciplinary approaches to working with children, adolescents and families. * Understanding of child protection procedures, statutory and legislative requirements, family court procedures. * Understanding of systemic approaches to working with children, adolescents and families. * Knowledge of family dynamics. * Ability to work with parents / care-givers / the child’s wider social network, e.g. school, GP, statutory bodies. * Understanding of non-verbal communication. * Understanding of the symbolism of play. * Ability to conduct an assessment and develop a treatment formulation, including a mental status report.   Practitioners will have undertaken a mother and infant observational study as per the Tavistock model, conducted over two years.  **Supervised clinical practice with children, adolescents and families**  During training, clinical supervision must be weekly throughout each training year. |
| **\*** **Competence to Practice in the New Zealand Context**  **See Notes 1 and 2 below:** Evidence of competence may include a written a statement showing how the practitioner demonstrates competence in these areas – not more than 600 words. | Psychotherapists practising in Aotearoa NZ will have undertaken a process of reflection on their own cultural identity, will recognise the diversity of worldviews (both within and between cultural groups), will understand the theories of power relations and the impact of colonisation processes. They will also recognise the impact that his or her personal culture has on his or her professional practice. For example, any action that diminishes, demeans or disempowers the cultural identity and wellbeing of an individual would be considered unsafe cultural practice.  Therefore, practitioners who arrive in New Zealand after the 1st October 2008 who haven’t provided evidence of this requirement will have a condition on their scope of practice which will require them to within 12 months of being registered provide evidence, in their own words, of competence in the following areas;   * Te Tiriti o Waitangi and relevance to psychotherapy practice in bicultural NZ; * Cultural and social dynamics and safety specifically relevant to bicultural NZ; * Understanding of the New Zealand Health sector and New the Zealand Legal system including working with the Accident Compensation Corporation (ACC), Health and Disabilities Commissioner (HDC) (including the HDC Code of Health and Disability Services Consumers' Rights Regulation), and the Health Practitioners Competence Assurance Act (HPCAA). |
| **Length of training/tuition:** | Minimum 3 years |
| **Tutor contact hours:** | Minimum 300 |
| **Minimum number of supervised clinical practise hours during training:** | Psychotherapy – 150hrs  Child and Adolescent Psychotherapy - 150hrs |
| **Graduation assessment requirement / process:** | A case study, supervisory reports and an oral account of therapeutic practice. |

**Note:** The Board provides a detailed assessment guide for practitioners to help them through this process. This guide is located on the Board’s website.

***Date approved: Nov 2008***

***Date of updates: Mar 2009 and September 2014***

1. Refer to the Board’s supervision policy [↑](#footnote-ref-1)