**Policy on Continuing Professional Development**

The Forum for Independent Psychotherapists (FiP) is a non-training Organisational Member of United Kingdom Council of Psychotherapy (UKCP) within the College of Psychoanalysis and Jungian Analysis (CPJA). Our members practice psychoanalytically, situating their work within the broad parameters of that shared heritage. These notes speak to the purpose of CPD (i.e., its ethos) and detail the specific criteria that members commit to fulfil (i.e., its legislated dimension).

CPD is defined by FiP as the “self-nominated schedule of activities through which a qualified psychotherapist maintains and develops their capacity to practice safely, effectively and appropriately within the contemporary norms of the profession”.

*Self-nominated:* Members are reminded of the value of reflecting closely on their evolving learning needs at each turn of their professional and personal lives. CPD is understood to be activity undertaken purposefully to foster professional security. It is entirely legitimate that attending an exhibition at an art gallery could be understood to be CPD, but it is not the attendance that makes it so. The choice of CPD activity is expected to respond to self-identified needs and preferences while also meeting the criteria set out further below.

*Schedule of activities:* This emphasises the deliberate nature of CPD; it *is* scheduled. “Activities” in the plural indicates that CPD comprises different spheres of experience. Someone attending a further period of intensive psychotherapy or analysis could easily accumulate the minimum number of CPD hours to be logged over five years through this important commitment alone; but no one activity—however valuable—can persuade as a CPD portfolio. Activities should foster learning in varied professional realms and the portfolio must include some clinical supervision.

*Maintains and develops:* Congruent with recognising the value of undertaking a variety of CPD activities, we can notice that while some are primarily about consolidating earlier learning (e.g., a reading group that explores classic papers), others extend this (e.g., a one-day conference about professional boundaries in a culture transformed by digital technology). A different strand of learning again may deliberately attend to relevant but essentially complementary activities (e.g., a one-term introduction to Dance-Movement Therapy, with no direct intention of ever introducing those practices in one’s own consulting room). Such distinctions are unlikely to be clear-cut, but some thought about the mix of old and new can be fruitful.

*Contemporary norms:* A satisfying clinical career may well last over four decades. While much psychoanalytic theory and practice does not currently tend to rapid innovation, it is only right that we ensure our professionalism sustains currency. As an example, maintaining a professional will was once a rarity, then more common, and is now a formal requirement of all clinical members. Our commitment to CPD reminds us of an ethical obligation to keep well-informed with recent thinking in our field and compliant with new regulations. CPD activity might well include contributing to the debates about such matters in the various organisations with which we are aligned, perhaps through formal membership of a committee.

**Appropriate CPD activity**

FiP requires all clinical members to fulfil their personal commitment to CPD in a manner that also demonstrably meets the current CPJA Policy on Continuing Professional Development, irrespective of whether they are a member of that organisation or not. The essential criteria expected of clinical members are:

1. To maintain a minimum caseload of one client, couple, patient, or supervisee in contracted psychoanalytic work. *These contact hours are not to be included in the figures listed below but are* additional *to them;*
2. To fulfil a minimum of 250 hours of CPD activity over a five-year period;
3. To fulfil a minimum of 20 hours of CPD activity in any one year;
4. To maintain a log of CPD activity that evidences the detail of how these criteria and the wider policy have been fulfilled. *This log will be audited by FiP in the ways described below. A number of UKCP members are asked to have their work audited within that organization each year, by random selection. This same CPD log will form an element of the review.*

The following passage is taken from the current CPJA Policy and incorporated here:

What may be considered as CPD is interpreted broadly and flexibly, so as to allow individuals to develop in ways that are both meaningful to them and relevant to their specific professional roles and responsibilities. For example, the maintenance and development of skills in clinical work, clinical supervision, teaching, clinical audit, research and management are all potential areas for CPD. Similarly, a wide variety of learning methods, such as the following, can be included in CPD activities:

* Clinical supervision;
* Personal analysis and therapy;
* Attendance at and participation in conferences, lectures, workshops, webinars;
* Personal study (e.g., preparation of lectures and workshops; writing papers; reviews; individual reading relevant to one’s practice);
* Professional discussion groups;
* Participation in activities on behalf of psychoanalytic organisations, such as committees and working groups.

Other activities may be undertaken with the intention of enhancing and/or maintaining the individual’s ability to do their psychotherapeutic work. These may include issues of a more personal nature, such as: the study and practice of spiritual traditions; the exploration of other modalities of psychotherapy; the study and practice of other activities and disciplines that can be shown to directly feed and support psychotherapeutic practice. The CPJA and FiP will expect the individual to be able to account for the way in which these activities are relevant and enhancing to their psychoanalytic practice. It is advisable to participate in a range of CPD activities.

FiP further distinguishes two *categories* of CPD activity, and requires members to fulfil commitments to both in each annual period:

1. *Clinical Learning* is the regular presentation and enquiring discussion of clinical practice, which may either be in individual consultation with a suitably experienced colleague, or within a peer group or facilitated clinical seminar of colleagues;
2. *Professional Learning* refers to all other CPD activities, such as those already included above, and also: lecturing and teaching, including work as a tutor or examiner; contributing to psychotherapy research as a participant or investigator. The accumulated list of possibilities is indicative, not meant to be proscriptive, and is certainly not exhaustive.

**Log of CPD activity**

Members are required to keep a log of CPD activity in sufficient detail that peer professionals could reasonably confirm that the above criteria have been met. A suggested *pro forma* is appended to this Policy. Members are not obliged to adopt this specific model, but their own forms are to present broadly comparable detail.

*Evidence.* Some activities are easily evidenced (e.g., FiP itself issues a certificate of attendance for participating in its CPD seminars), and where that is available, it is reasonable to expect that the evidence will be filed in the portfolio, available to be seen. Other activities are not at all easily evidenced (e.g., personal reading), and there is no expectation that these will be.

*Hours.* Similarly, some activities allow completed hours to be noted very easily; others do not. The suggested log *pro forma* leaves room for both ‘actual’ and ‘nominal’ hours to be recorded in different columns, distinguishing between them to foster clarity and transparency.

*Duration.* The criteria above are structured in a five-year cycle of CPD commitment. At any only time, Members are expected to hold available:

* their most recently completed five-year log, plus
* the ongoing record that covers the period from the last five-year log to date.

These expectations are set by FiP to hold alignment with UKCP Policy. Members should satisfy themselves that this will meet the minimum expectations of other professional bodies with which they are engaged (e.g., some insurance providers expect full practice records to be kept for seven years; others, indefinitely).

**Review of CPD log**

Each year, twenty per cent of members are asked to present their most recent year-long CPD log for review by the Membership and Accreditation Committee. The annual sample is not random but organized so that—over a five-year cycle—the entire membership’s logs are reviewed systematically. The Committee’s task is to confirm with each individual member that their log evidences fulfilment of FiP’s CPD Policy. This provides individual members and FiP as an organization with reassurance that the current Policy is both clearly understood and being fulfilled. If the Committee is unable to confirm that a log evidences fulfilment of the CPD Policy, appropriate discussion is arranged to support the peer member to demonstrate fulfilment in a further submission or submissions. Membership for the year being applied for will not be held up whatever the outcome of review; however, any subsequent application to renew annual membership (i.e., for the year after the year that included a CPD-log review) will not be agreed unless this matter has been resolved in the meantime. A member who believes that their application to renew has been unfairly declined may appeal the decision by FiP’s Grievance Policy. Under this suggested process, each member will present their CPD logs for two reviews in a five-year cycle: once to a peer group during reaccreditation and another time to a collegiate Committee.