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BABCP
Minimum Training Standards

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Introduction

BABCP sets Minimum Training Standards ('MTS') for accreditation as a cognitive and/or behavioural psychotherapist. We use these standards to assess whether someone meets the minimum criteria to become accredited as a CBT practitioner. People who use CBT services; employers and members of the general public can use them as a benchmark for CBT training, and can expect someone who is accredited by us to meet these standards.

The standards give details about the level of training, experience and practice that therapists must have in order to become accredited. We use these standards to assess applications for Practitioner Accreditation and CBT Course accreditation.

Applicants who successfully complete accredited CBT courses will be assessed against the Minimum Training Standards in force when they were selected to the CBT training programme. Individual applicants for accreditation are subject to the MTS that are in force at the time that they apply for accreditation.

Other documents and resources to refer to alongside this document are:

BABCP Standards of Conduct, Performance and Ethics

BABCP Core Curriculum 2021

The CBT Register UK and Ireland

Glossary/ Abbreviations

CBT – Cognitive Behavioural Therapy

CPD – Continuing Professional Development

HEI – Higher Education Institution

KSA – Knowledge, Skills and Attitudes portfolio of evidence route to accreditation

Summary

This section briefly summarises the Minimum Training Standards (MTS).
Section 1: Summarises the aims of the MTS
Section 2: Overview of accreditation requirements.
To become accredited as a CBT practitioner, you must show that you have met the standards, as well as providing evidence that:

- You adhere to BABCP Standards of Performance, Conduct and Ethics
- CBT is one of your main psychotherapy models
- You have on-going CBT clinical supervision
- You participate in continuing professional development (CPD)

Section 3: Your professional background in mental health

- Mental health professions that we recognise as a suitable background to train in CBT
- Our process for recognising equivalence via the Knowledge, Skills and Attitudes (KSA) portfolio route

Section 4: Evidence of CBT training:

- 450 hours' specific training in Cognitive Behavioural Therapy (CBT) at postgraduate level. This will be least 200 hours' direct, structured teaching with 100 hours on core fundamentals of CBT and 250 hours' self-directed learning
- 100 hours must be part of a single programme/course
- Trainers must be appropriately qualified CBT specialists

Section 5: Personal development

- Self-reflection and self-awareness, process aspects of therapy, reflective journal
- Anti-discriminatory practice; power; personal and systemic bias; equality, diversity and inclusion

Section 6: Assessment of knowledge, theory, research and/or publication
Section 7: Supervised clinical practice

- 200 hours' supervised CBT clinical practice in direct contact with clients
- 40 hours' clinical supervision
- Clinical supervisors must be appropriately qualified
- Five hours' clinical supervision on each of three closely supervised cases
- Clinical supervision contract
- Assessment of competent clinical practice, including
  - working with at least three different presentations including anxiety and affective disorders
  - at least eight training cases with close/live supervision on at least three
  - at least three assessed recordings of competent practice
  - four case studies of client work
  - Clinical supervision logs

Section 1:
Aims of these standards

The standards aim to provide information about training needed to become a CBT therapist. This part of the Minimum Training Standards introduces what the MTS are for. We asked for feedback from stakeholders including people who have used CBT and experts in the field before publishing this version.

a. The information in the MTS may be used by:
   i. Individuals aiming to seek accreditation as a CBT practitioner
   ii. Organisations such as training providers or commissioners which aim to meet our expectations about content and assessment in CBT training
   iii. Stakeholders such as employers or other organisations and individuals who can use them as a benchmark of standards in CBT training

Section 2:
A summary of requirements for CBT practitioner accreditation

To become accredited you must:

a. have a background in a mental health profession, (see also section 3)
b. show how your CBT training meets these Minimum Training Standards
c. undertake regular, CBT-specific Continuing Professional Development (CPD)
d. be receiving clinical supervision
e. adhere to the BABCP Standards of Conduct, Performance and Ethics for the Practice of Cognitive and Behavioural Psychotherapies
f. be providing Cognitive and/or Behavioural therapies as your main (or one of your main) therapeutic models in clinical practice

Section 3:
Core professional requirements and background needed to train in CBT

Background needed to train in CBT:

a. Academic level

i. Before you train in CBT, you must have a degree or equivalent level of academic education. This may be part of a core mental health profession training or by demonstrating that you meet our recognised equivalent which is called the 'Knowledge, Skills and Attitudes' KSA route (see section 3c).

ii. A degree or equivalent is needed to meet the academic requirements of CBT training. If you meet the 'core profession' requirements, you will have this academic level.

iii. iIf you are following our recognised equivalent route to a 'core profession' (see 3.2. below) you will have at least an undergraduate degree or equivalent academic level of qualification to meet this standard.

1. Higher Education Institutions may vary in their requirement for academic standing before recruitment to a course.

a. Professional background

In order to train, you must demonstrate that you have a 'core' mental health profession or BABCP recognised equivalent.

i. We recognise specific mental health professions as suitable backgrounds to train in CBT. These are known as 'core professions'.

ii. Details of mental health core professions that we recognise are given here

b. Knowledge, Skills and Attitudes (KSA)

If you do not have a 'core' profession, you can complete the Knowledge, Skills and Attitudes (KSA) route.

i. This means providing a portfolio of evidence which demonstrates how you have equivalent training and experience to someone with a 'core' mental health profession. This widens participation by allowing people to train in CBT using an alternative route.

ii. The KSA portfolio includes meeting a number of criteria. You will find more detail here

c. Background learning

Your professional mental health background must include gaining a critical understanding of relevant areas of study. These include human development across the lifespan, psychology and psychopathology, social context and evidence-based practice. These are part of the professional background and knowledge needed before training in CBT.

i. Human development across the lifespan must specifically include child development.

ii. Understanding psychological theories of human behaviour and the mind, as well as learning about wellbeing; risk; distress and different mental health presentations will be covered in a core mental health professional training programme.

iii. The depth and breadth may vary between disciplines. The professions that meet all of our expectations are called 'core professions' and are listed here

iv. Training will also include understanding the impact of environment and social context on human behaviour and mental wellbeing.

d. Professional registration and regulation

You must have been registered with a professional regulatory body linked to your core profession, or have met the requirements of the KSA route.

i. As mentioned in 3.2, you must demonstrate a professional background in mental health before applying for CBT accreditation.

ii. If you have been registered with a professional body as listed in the core professions, we will recognise this as meeting 3.4. (link/ to Core Professions list including Professional bodies.)

iii. If you are using the portfolio of evidence KSA route, we will recognise this as an equivalent background when all the criteria have been assessed as meeting the requirements.

e. Post-qualification experience in a recognised profession

i. We expect everyone who applies for accreditation to have the equivalent of twelve months' full time experience in their 'core' profession after qualifying. You must have experience of therapeutic work with clients as part of this experience.

ii. You must have been accountable to someone senior in one of our recognised mental health professions for that twelve months, and you must be able to demonstrate that you understand professional accountability.

1. Note: A client means a person who uses therapeutic services.

Section 4:
CBT Training

To be accredited as a CBT practitioner, you must meet all of the training hours and requirements.

a. Overall length of Training

i. The overall length of training means the time spent in core professional training added to the time spent completing CBT training. It will take at least four years' full time training to meet both the core professional requirements and the CBT specific training. In many cases, it will take longer than four years altogether.

ii. Your CBT training must include at least 450 hours of study at postgraduate level (see section 6 for definition); with an additional 200 hours' supervised clinical practice.

iii. The 450 hours of training must include at least 200 hours of direct and structured training. The trainers must be BABCP accredited practitioners or meet our expectations as set out below.

iv. You must provide evidence of how the remaining 250 hours have been met; which can be self-directed learning

v. your direct and structured CBT training must include at least 100 hours achieved by graduating from a postgraduate course (see section 6 for definition) which is validated by a Higher Education Institution.

vi. There is an Exceptional Circumstances Route for people who completed CBT training when a previous version of these standards was in place.

b. Content of CBT Training

i. You must provide evidence that your training covered key cognitive and behavioural theories and the core evidence for applying them in practice. Refer to the Core Curriculum linked from Page 3 of this document.

ii. Our Core Curriculum sets out fundamental requirements of specialist CBT training. The accreditation application includes a self-assessment audit of training to record how you have covered the core curriculum requirements. You must provide details of the trainers and their credentials, and how the training was assessed.

iii. If you have completed a course which did not cover all of the expectations of CBT training, the accreditation application can be used to show how you met the requirements.

iv. Training must include understanding the key theories that CBT is based on and the evidence and interventions which have arisen from a CBT theoretical perspective. (see also section 6 below)

v. Training must also include understanding CBT psychotherapy practice, therapeutic relationship; promoting examination and focus on one's own beliefs, judgements and actions in clinical practice; commitment to equality, diversity and inclusion, ethical practice and personal development, (see section 5 below)

vi. The 200 hours' direct and structured training should be focused on the fundamentals of CBT, and cover the Core Curriculum. Specifically, at least 100 hours will be focused on training in core evidence-based CBT as described in 'Part A' of the curriculum.

vii. The expectation is that the 200 hours' structured training will focus on areas with a recognised research base as described in the Core Curriculum; however, training can include up to 20 hours on other areas such as newer developments in CBT.

c. Accredited courses and practitioner accreditation

i. If you have graduated from a BABCP Level Two accredited course you can apply for practitioner accreditation using the 'Level 2' route as you can already demonstrate that you have met training requirements. You will not need to provide further detail in your accreditation application.

ii. If you have graduated from a Level One accredited course we have details of the training you completed. You will have partially completed what is needed to meet these standards. The Level One training summary will show which areas have been covered during the programme you completed; and where additional training will be needed. If you have done any extra training or supervised clinical practice during the Level One course, the programme will give you a statement you can use when you apply for accreditation.

iii. If you have not completed an accredited course, you must provide the curriculum of the CBT programme and a transcript or formal equivalent in order to complete your application for accreditation**.**

iv. CBT training programmes are sometimes commissioned to cover a specific curriculum. Your CBT training can include working with particular populations (such as children) or specific presentations (such as psychosis) as long as the fundamentals are covered. Your application for accreditation can be used to show how this has been met.

d. Theory and skills training

i. Learning skills is an essential as part of gaining knowledge and experience of CBT during training, and there should be a ratio of at least 50:50 skills to theory during structured CBT training programmes. Skills training will include such activities as role play with feedback, practicing specific techniques, reflection and demonstrations.

ii. All theoretical and skills teaching must allow for 'live' interaction with the opportunity for discussion; small group work; questions and exploration.

e. People with personal experience

i. Training must include learning from and with people who are experts by experience in mental health issues and seeking feedback from clients.

f. Trainer credentials

i. To be recognised by us, a CBT trainer should have BABCP CBT practitioner accreditation. If you complete an accredited course, this is a requirement. For training on a course which is not accredited by us, applicants for accreditation must provide evidence that their CBT trainers met these expectations:
   1. International qualification and accreditation in CBT, such as EABCT (European Association for Behavioural and Cognitive Therapies) accreditation.
   2. OR
      Postgraduate training in CBT (see section 6 for definition)
      AND In current clinical practice using CBT as their main, or one of their main, therapeutic models AND receiving CBT clinical supervision
      AND participating in CBT-specific continuing professional development (CPD) activities

Section 5:
Personal development

You must have training and experience in managing your personal involvement in the process of CBT; awareness of equity, equality, diversity and inclusion, and be able to demonstrate that you have had specific training on personal development as part of becoming an effective CBT therapist.

a. You must continue to ensure that you can both identify and manage your personal involvement in the process of Cognitive and/or Behavioural Therapy. This can be developed via a Self-practice/self-reflection and a course journal or reflective log of personal development
b. Training and experience will include
   i. ethical and professional behaviour including fitness to practice, and the impact of therapy on the therapist. You must demonstrate an ability to recognise when you need additional support or are unable to perform as a therapist according to the Standards of Conduct Performance and Ethics
   ii. You must demonstrate that you have training and skills in promoting inclusion, an awareness of diversity and an understanding of the multiple and linked oppressions and discrimination associated with ethnicity, race culture, gender & gender diversity, sexual orientation, faith, age, disabilities, neurodiversity and individual differences and the impact these intersections have on mental health and therapy.
   iii. Understanding of the statutory duties under the Equality Act 2010
   iv. Training in cultural competence, including cultural humility and promoting cultural safety.
   v. Anti-racist and anti-discriminatory practice in general; with opportunity to enhance awareness of power and privilege, systemic and organisational contributions to inequality; promoting social justice and living the values of the profession, particularly in relation to people disproportionately affected by these.
   vi. Demonstrating awareness of personal reaction to diversity and the implications of these reactions during sessions. You must show ability and willingness to recognise your own background and culture, processes; personal and organisational context and implicit biases, and work to reduce their impact on therapy.
   vii. Skills in working effectively with interpreters, establishing ways of working together and considering clinical implications.
   viii. Demonstrating awareness of structural and economic inequality, how this can impact on therapy and how you can mitigate the effects of this impact.
c. To apply for CBT practitioner accreditation, you will provide evidence of receiving this training and experience via a clinical supervisor's report and your completed record of training.

Section 6:
Assessment of knowledge of CBT theory, use of literature and research

You must provide evidence of formal assessment of training in theoretical underpinnings of CBT at postgraduate level. This means that a first degree or equivalent is expected before starting CBT training. The specific CBT training will be at a more advanced level, and at least the equivalent of postgraduate certificate, postgraduate diploma or Masters' degree. This is Level 11 in Scotland; Level 7 in England, Northern Ireland and Wales; Level 9 in Ireland. In order to do this,

a. You must acquire and demonstrate critical appraisal skills in relation to CBT research. You must show that you can understand and interpret studies on the process, outcome and effectiveness of cognitive and behavioural therapies.
b. You must be assessed at postgraduate level on your knowledge and use of CBT theory and research literature.
c. Formal assessment must include at least one of the following:
   i. an essay, exam or research project which demonstrates understanding of the theoretical underpinnings of Cognitive and Behavioural therapies OR
   ii. an extended case report (3-5,000 words). The extended report may

be one of the four case studies required (see 5.5) This will critically discuss the Cognitive/Behavioural Therapy research evidence in relation to the case being reported OR

iii. a CBT relevant research dissertation OR

iv. a CBT relevant research paper which you can show you have made a significant contribution to; and/or published in a peer reviewed journal

d. Our application for accreditation is designed to guide you in providing this information with supporting evidence.

Section 7:
Supervised clinical practice and assessment of competence

The overall quantity of supervised practice

a. You must complete at least 200 hours' individual CBT assessment and therapy under CBT clinical supervision to meet practice requirements during your CBT training.

b. Clinical practice is in addition to the 450 training hours. The majority of the 200 hours' supervised clinical practice is expected to be carried out as one-to-one therapy, to achieve a thorough grounding in the core models of therapy in CBT. When the training programme includes training in group or couples' work, up to 20 hours of the supervised practice may be undertaken in that setting.

c. You must have training in the way that the therapy is delivered. For example, face-to-face; video-conferencing or other remote methods.

d. During your training, you must use evidence-based case-conceptualisation and protocols. These are described in the Core Curriculum.

e. Clinical Supervision requirements. The key principle for clinical supervision is that it must meet the needs of the supervisee.

f. Clinical supervision during training should be provided by a BABCP accredited practitioner. This is good practice, and it is a requirement of accredited training programmes.

g. In exceptional circumstances, when not completing an accredited CBT training course, a clinical supervisor can be someone who

i. Has an international qualification and accreditation in CBT, such as EABCT (European Association for Behavioural and Cognitive Therapies) accreditation.

ii. OR has

1. Postgraduate training in CBT (see section 6 for definition)
2. AND is in current clinical practice using CBT as their main, or one of their main, therapeutic models
3. AND is receiving CBT clinical supervision
4. AND is participating in CBT-specific continuing professional development (CPD) activities

h. Clinical supervision may be in individual or group settings . There must be opportunity for individual supervision.

i. One hour of clinical supervision should be received for every five hours' CBT clinical practice during training. The 200 hours' supervised clinical practice needed to meet MTS will mean a minimum of 40 hours' clinical supervision.

j. As mentioned above, the amount of additional supervision will depend on the supervision needs of the individual, the course curriculum and their stage of training.

k. Supervision will include elements of personal development and working with diversity as described in Section 5.

l. Closely Supervised Cases Three CBT cases must be closely supervised and formally assessed. "Close supervision' is when the clinical supervisor observes clinical practice carried out by the supervisee. This may be observing a session as it happens, or reviewing a recording of a session.

m. Clinical supervision is most effective when it includes a 'live' element as well as other methods such as role play or modelling. You must have 'live' supervision for at least 50% of your clinical supervision sessions during training. This means either 'in vivo' or recordings of sessions are used.

n. Clinical supervision will include reviewing whole or part sessions. An extract will be long enough to be sure that feedback and development can happen. For example, reviewing a section because an issue came up in the relationship; or a part of the session where a particular technique is being used.

o. For each of the three closely supervised cases you must be assessed to show that you are competent. A complete mid-therapy session must be marked using a validated CBT skills assessment scale. The assessor must be trained in using the scale. The cases must cover a range of presentations including at least two anxiety disorders **or** one anxiety disorder and one trauma and stressor-related disorder **as well as** one mood disorder. Interventions must be based on core CBT evidence-based protocols with reference to the Core Curriculum.

p. You must receive at least five hours of clinical supervision on each of these three closely supervised cases, and more than this if it is needed.

q. You must have a CBT clinical supervision contract. A clinical supervision contract will include the agreement between the parties on meeting the supervisee's needs; and further details can be found in the supervision guidance

r. Clinical supervision groups should have no more than four supervisees during CBT training.

s. A formula is used to calculate equivalence to individual supervision received during a group. The total time spent in the group is divided by the number of supervisees; this time is doubled

t. The formula is used to calculate individual 'equivalent' clinical supervision hours received when in a group setting. The way that the formula works means that a group of two supervisees are able to 'count' all of the time spent in supervision as equal to individual supervision hours. Here are two other examples:

   i. **Example one**: four supervisees in a group for two hours. 2 hours divided by 4 = 30 minutes then x2 = 1 hour each.

   ii. **Example two**: three supervisees in a group for 1 hour 45 minutes. 1 hour 45 minutes divided by 3 = 35 minutes x 2 = 1 hour 10 minutes each

u. **Training Cases** You must complete at least eight cases including assessment and treatment under CBT clinical supervision from a BABCP practitioner accredited clinical supervisor (for exceptions, see **g** above). You must have delivered an adequate trial of treatment for each of the eight cases, according to an evidence-based CBT model.

v. The eight cases must include at least two different anxiety disorder presentations **or** one anxiety disorder and either trauma and stressor-related disorder **as well as** a mood disorder presentation.

w. The interventions used for the eight training cases must be based on core CBT evidence-based protocols or formulation driven CBT treatment

x. **Case studies** At least four of the eight training cases must be presented and formally assessed as case studies. Written case studies should be between 2000-4000 words (or 3000 - 5000 for an extended case study incorporating critical appraisal skills in relation to CBT research (See Section 6cii). We recommend that the four case studies cover at least three different presentations and/or treatment protocols. Some training courses will specify whether the case studies must be the same cases as the ones which are 'closely' supervised. For meeting our standards, the case studies can cover the same cases that are 'closely' supervised or they can be different cases.

   i. Two of your formally assessed case studies may be delivered as a 'live' case report or verbal presentation instead of a written study. If the case study is delivered as a live case report or presentation, there should be supporting information such as slides or a written summary; as part of the formal assessment.

   ii. Case studies that are assessed must be marked as a 'pass', whether this is part of a formal programme or completed independently.

   iii. The four case studies must meet our academic standards for formal assessment. When being marked independently, the marker must have recent experience of marking case studies in an academic setting. The completed mark sheet for the case study would be submitted along with an application for accreditation.

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