**Couple Therapy for Depression Approved Practitioner Training**

**Information and Application Form**

**Please refer to the website for upcoming training dates, locations and current fees.**

**https://tavistockrelationships.org/training-courses/couple-therapy-for-depression-training**

**or contact** **ctfd@tavistockrelationships.org**

**This form can be completed for any training date**

What is Couple Therapy for Depression?

Based on NICE guidelines, Couple Therapy for Depression is a brief integrative-behavioural treatment for depression for couples where one or both partners are experiencing relationship distress and depression. It has been developed by identifying best practice in a range of behavioural, systemic, psychodynamic, cognitive and emotionally focussed couple therapies evidenced in RCT effectiveness trials. Couple Therapy for Depression focuses on the relational aspects of depression and on factors that reduce stress and increase support within the couple, using the relationship as a resource for recovery and relapse prevention.

About the Training

This CPD course is made up of 5 days of formal teaching and 20 sessions of remote supervision, for approximately 9-12 months.

Please note that we expect 100% attendance for the 5 days of teaching and a minimum of 80% attendance for supervision.

It enables practitioners to practice the evidence based, NICE approved, Couple Therapy for Depression as a treatment for mild to moderate depression within their IAPT service nationally. Successful completion of the course and supervised clinical work allows to practice as an approved ‘Couple Therapy for Depression IAPT Practitioner’.

Who is Eligible for the Training?

Applicants will need:

* An interest in developing and extending their practice to work with couples where one or both are diagnosed with depression
* To be in an IAPT Service, or be able to access their clinical work through an IAPT service.
* To be able to access appropriate couple referrals, from the outset of the course. We recommend referrals of approximately 3-4 couple cases.
* Experience of working with couples is beneficial, although this is not a prerequisite.

Structure and Assessment of the Training

Trainees will be expected to:

* Participate in 5 days of formal teaching and 20 fortnightly supervision sessions across approximately 9-12 months. This will be facilitated by the training team and training consultants. Supervision will be conducted in groups and requires video conferencing, which Tavistock Relationships will facilitate.
* Submit 5 digital audio recordings of therapy sessions, of approximately 2-3 couple cases, as well as verbal reports.

What will successful trainees receive?

When the criteria are met, the trainee will receive:

* Certificate of Satisfactory Attendance after 5 days of the course
* Certificate of Completion as Couple Therapy for Depression IAPT Practitioner after supervision and assessment of at least two training cases, up to 20 sessions.
* Upon full completion of the practitioner training their name will be included on the Couple Therapy for Depression website as an approved Couple Therapy for Depression Practitioner. This will be displayed for 25 Years unless the person requests that their name be removed.

How will the application be assessed?

Each application must include:

* a completed ‘Applicant’s Details’ form (below)
* a statement of support from a current supervisor (below)
* a statement of support from your line manager (below)

All applications will be screened by the Lead Trainer to ensure that the entry requirements of qualification, experience and setting have been met. Those that do not meet the criteria cannot be accepted. Places will initially be allocated on a first come, first served basis.

**Early application is encouraged – deadlines can be found on the CTFD website -** **https://tavistockrelationships.org/training-courses/couple-therapy-for-depression-training**

**Training will take place subject to Tavistock Relationships recruiting the requisite number of applicants.**

About the Training Provider

Tavistock Relationships developed Couple Therapy for Depression for use in IAPT services, having been commissioned by the Department of Health to create a competencies framework for this treatment. Tavistock Relationships subsequently produced the Training Course that leads to become an approved Couple Therapy for Depression IAPT Practitioner, and has successfully delivered it around England since 2010, as well as delivering Supervisor courses. Tavistock Relationships is currently the only fully approved training provider for Couple Therapy for Depression.

Funding

* **The training is funded by Health Education England for professionals who meet the eligibility criteria, i.e. professionals working within an IAPT service or those able to access their clinical work through an IAPT Service.**
* We also welcome applicants from IAPT services unable to access HEE funding, but able to finance the training.
* Practitioners in private practice who have access to work with couples and able to finance the training.

Queries

If you have any queries, including if you are unsure if you meet the criteria, please contact a member of the Training Team:

**Email**: ctfd@tavistockrelationships.org

**Phone**: 020 7380 8288

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**www.TavistockRelationships.org |56-60 Hallam Street** | **020 7380 8288** | **ctfd@tavistockrelationships.org**

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**Couple Therapy for Depression Accredited Practitioner Training**

**Applicant’s Details**

|  |  |
| --- | --- |
| Course Dates:(See website for dates currently available) |  |
| Full name:(This is how it will appear on the certificate) |  |
| Home Telephone no: Mobile no: Work Telephone no:  |
| Email address work:**Compulsory** |  |
| Email address personal: Optional  |  |
| Job role: |  |
| IAPT service name: |  |
| Base address: |  |
| Employing organisation: (Include full address if different from base address) |  |
| IAPT Clinical Service Lead: |  |
| LETB Education Commissioner: |  |

**1. Have you ever applied for Couple Therapy for Depression Training previously?**

**YES or NO**

**If ‘yes’ please provide more information:**

**2. Please give details of your current role within IAPT or the voluntary sector. Including if you work at Step 3 / High Intensity:**

**3. Please give details of your qualifications to date as a therapist or counsellor and therapeutic experience:**

**4. If you have recently qualified, approximately how many client hours do you have to date?**

**5. Do you have a qualification as a Couple Therapist? YES or NO**

 **If YES, please give details of the qualification level, awarding body and date:**

**If NO, please give details of your equivalent experience in the following two areas:**

* **working with couples/more than one individual with common mental health problems under supervision**
* **CPD activities related to working with couples**

**6. Please give details of your professional accreditations e.g. BACP, HPC etc.:**

**7. Have you had training in risk issues, safeguarding and clinical governance?**

**YES or NO**

**If YES, please give details of this training or courses where these areas were covered:**

**8. Would taking up a place on the course face you with any disability-related difficulties? Please indicate what:**

**9. Please include a photograph of your face/ shoulders. (The photograph is only used for the trainers to recognise people once they have a place on the training).**

**You can attach this with the email as a JPEG / Word/ PDF file or paste the image here:**

**10. Where did you see this course advertised?**



Our Website                      Our Email                     Social Media Colleague

Other Website (please specify)

Publication     (please specify)

Other              (please specify)

**11. We’d like to keep you updated on our range of training opportunities, CPDs and events, and how you can support us via, our newsletter.**

**Please indicate that you are happy to receive this information about Tavistock Relationships’ work:**

YES or NO

**12. Do you wish to receive information from Tavistock Relationships notifying you of our other Couple Therapy events and trainings?**

YES or NO

**How would you like to be contacted (select all that apply)**

Email Post Phone

**We will never sell your data and promise to keep your details safe and secure. You can change your mind at any time and stop receiving updates by emailing us at** **ctfd@tavistockrelationships.org****.** **Please use this email address to notify us of changes to you details.**

**By signing this form you are confirming that you:**

* Agree this completed application form can be sent to the funding provider, if applicable.
* Have read and accepted the Tavistock Relationships Training Privacy Notice. (Provided as a separate document with this application
* Can fully participate in the Training - 5 days formal teaching, 20 fortnightly supervision sessions, submission of 5 audio recordings of therapy sessions (approx. 2-3 cases) and written reports. Duration of the full training is approximately 9-12 months.

**Please email completed form to:** **ctfd@tavistockrelationships.org**

**Applicant Signature: Date:**

 **Couple Therapy for Depression Approved Practitioner Training**

**Manager Statement (Manager to complete)**

|  |  |
| --- | --- |
| Course Dates: |  |
| Applicant’s Full Name: |  |
| Your Full Name (Manager): |  |
| Your Current role: |  |
| Your Employing Organisation: |  |
| Your Work Address: |  |
| Your Work email Address: |  |
| Your Work phone number: |  |

The training is for practitioners who have an interest in developing and extending their practice to work with couples where one or both are diagnosed with depression, and although experience of working with couples is beneficial, it is not a prerequisite.  However, applicants must be currently working within a service that is setting up a couple service or have a couple waiting list so that trainees are able to begin working with couples immediately after the five day course.

The training programme involves a 5 day course following which trainees will be expected to participate in 20 fortnightly supervision sessions, with a Tavistock Relationships supervisor, work on 2-3 training cases, depending on the levels of competence, and submit 5 digital recordings from their training cases. Supervision is conducted in groups and requires video conferencing.

|  |
| --- |
| **By signing this form you:** * Agree to proactively support the applicant’s access to appropriate treatment cases.
* Agree to release the applicant for supervision sessions, and confirm that you understand and support the requirements of this application going forward:

5 days formal teaching, 20 fortnightly supervision sessions, submission of 5 audio recordings of therapy sessions (approx. 2-3 cases) and written feedback and self-reflections. Duration of the full training is approximately 9-12 months. * If you are not the Clinical Service Lead for IAPT, you are indicating that this application has been discussed with them and that you are satisfied that they have approved of the application.
* You are in support of the applicant completing the IAPT minimum data set.
* You are confirming that you have read and accepted the Tavistock Relationships Training Privacy Notice.
* If your details change, please notify us.
* You are confirming that your service has appropriate information security standards in place to meet legislative requirements including Data Protection Act 2018, and that you are able to provide organisational policies and procedures upon request.

**Please return completed form to:** **ctfd@tavistockrelationships.org**If the signature is typed, as opposed to signed, this section of the application form must be returned to us directly from the Manager’s email address. **Manager Signature: Date:**  |

**Couple Therapy for Depression Approved Practitioner Training**

**Supervisor Statement (Supervisor to complete)**

|  |  |
| --- | --- |
| Applicant’s Full Name: |  |
| Your Full Name (Supervisor) |  |
| Your email address |  |
| Your phone number |  |

The training is for practitioners who have an interest in developing and extending their practice to work with couples where one or both are diagnosed with depression, and although experience of working with couples is beneficial, it is not a prerequisite.  However, applicants must be currently working within a service with a couple waiting list so that they are able to begin working with couples immediately after the five day course.

The IAPT training programme involves a 5 day course following which trainees will be expected to participate in fortnightly supervision sessions, totalling 20 supervisions. Their training will be facilitated by the Training team and Training consultants. Supervision is conducted in groups and will require video conferencing. Trainees will be required to submit digital audio recordings of therapy sessions as well as written reports.

**Please provide a statement commenting on the applicant’s suitability as a candidate for training. Your statement should reflect current and recent practice. (Please use as much space as you need.)**

1. **Please comment on general competence and experience.**
2. **The applicant’s aptitude for undertaking this training.**
3. **Please confirm that the applicant has received training in risk issues, safeguarding and other clinical governance areas** YES or NO

**By signing below;**

* You are confirming that you support the application.
* You also understand that we may contact you as part of the selection process for trainees.
* You are confirming that you have read and accepted the Tavistock Relationships Training Privacy Notice.
* If your details change, please notify us.

**Please return completed form to:** **ctfd@tavistockrelationships.org**

If the signature is typed, as opposed to signed, this section of the application form must be returned to us directly from the Supervisor’s email address.

**Supervisor Signature: Date:**

**Payment**

If the applicant is **not** applying for a funded place we require the following information for the invoice:

|  |  |
| --- | --- |
| **Purchase Order number** *(PO number)* |  |
| **Contact name** |  |
| **Contact email address** |  |
| **Contact full address incl. postcode** |  |
| **VAT applicable** *(circle appropriate)* | Yes / No  |

We will only send an invoice for the course fee upon participant’s acceptance of a place. **NB:** there will be a 10% charge if you withdraw after acceptance of a place. Tavistock Relationships reserve the right to cancel or postpone a course if insufficient bookings have been received. Delegates will be offered an alternative date or a full refund of the course fee.

**Name: Signature: Date:**