

Comparable qualification

This policy only applies to practitioners applying for registration using an overseas qualification.

Practitioners applying via the tertiary pathway who have not completed an approved master's level qualification in psychotherapy from an Aotearoa New Zealand university or an Aotearoa New Zealand training institution will need to meet the Board's Policy statement on Criteria Expected for Comparable 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 Core Clinical Competencies. Areas missing may be able to be covered in a competence statement from a supervisor approved by the Board.

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 Aotearoa New Zealand society.

The Board provides a detailed comparable qualification assessment guide for practitioners to help them through this process.

New Zealand Qualifications Authority (NZQA) assessment

Applicants may be asked to have their qualification verified by NZQA as being equivalent to a Aotearoa New Zealand master's 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 as it is not profession specific and 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

Master's level qualification or comparable

Practitioners must be able to provide evidence from coursework of competence in:

- understanding of lifespan 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
- basic understanding of Aotearoa New Zealand 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 other's processes
- 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 use supervision and other resources to improve practice. During training, there must be a minimum of 2 years of clinical practice with weekly supervision throughout at least 1 year.

Competence to practise in the Aotearoa New Zealand context

Evidence of competence may include a written a statement (not more than 600 words) showing how the practitioner demonstrates competence in these areas.

Psychotherapists practising in Aotearoa New Zealand will have undertaken a process of reflection on their own cultural identity, will recognise the diversity of worldviews (both within and between cultural groups) and will understand the theories of power relations and the impact of colonisation processes. They will also recognise the impact that their personal culture has on their 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 Aotearoa New Zealand after the 1 October 2008 who haven't provided evidence of this requirement will have a condition on their scope of practice, which, within 12 months of being registered, will require them to provide evidence in their own words of competence in the following areas:

- Te Tiriti o Waitangi and relevance to psychotherapy practice in bicultural Aotearoa New Zealand
- Cultural and social dynamics and safety specifically relevant to bicultural Aotearoa New Zealand.
- Understanding of the Aotearoa New Zealand health sector and Aotearoa New Zealand legal system including working with the Accident Compensation Corporation (ACC), Health and Disability Commissioner (HDC) (including the HDC Code of Health and Disability Services Consumers' Rights) and the Health Practitioners Competence Assurance Act 2003 (HPCA Act).

Length of training/tuition

Minimum 3 years.

Tutor contact hours

Minimum 300 hours.

Minimum number of supervised clinical practice hours during training

150 hours.

Graduation assessment requirement/process

A case study, supervisory reports and an oral account of therapeutic practice.

Criteria for equivalence to Psychotherapist Scope of Practice with Child and Adolescent Psychotherapist Specialism

In addition to the Psychotherapist Scope of Practice requirements above, practitioners must be able to demonstrate knowledge of and competence in:

- 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 multidisciplinary 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 mahi with parents/caregivers and 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 2 years.

Supervised clinical practice with children, adolescents and families

During training, clinical supervision must be weekly throughout each training year.

<i>Approved by: The Board</i>	<i>Policy in effect from: November 2008</i>
<i>Previous review dates: March 2009, September 2014</i>	<i>Date to be reviewed: November 2020</i>