

STANDARD DRAFT PREVIEW

Contents

- 1. Key information
- 2. Occupation summary
- 3. Typical job titles
- 4. Entry requirements
- 5. Occupation duties
- 6. Knowledge
- 7. Skills
- 8. Behaviours
- 9. Qualifications
- 10. Professional recognition
- 11. Consultation
- 12. Progression Routes
- 13. Supporting uploads
- 14. Involved employers

Standard in development L7: Family and Systemic Psychotherapist

Title of occupation

Family and Systemic Psychotherapist

UOS reference number

ST1310

Core and options

No

Level of occupation

Level 7

Occupational maps data

Route: Health and science **Pathway:** Health **Cluster:** Health professional

Typical duration of apprenticeship

24 months

Degree apprenticeship

integrated degree

Target date for approval

31/10/2023

Resubmission

No

Would your proposed apprenticeship standard replace an existing framework?

No

Does professional recognition exist for the occupation?

Yes

Professional recognition

Yes, UKCP, UK Council for Psychotherapy which registers all Family & Systemic Psychotherapists.

Occupation summary

This occupation is found in the NHS, adult, children and young people's social care services, independent practices, private health and care facilities, charitable organisations, and educational institutions. Family and systemic psychotherapists may work with a specific

population. For example, children and young people, adults of all ages, or people with learning disabilities. They may provide family and systemic psychotherapy in a particular work setting, such as mental health or social care.

The broad purpose of the occupation is to help individuals, families, couples and wider networks to find ways to help each other when one or more members are struggling with mental health, relational and or behavioural difficulties. They may provide therapy for whole families, parts of families, individuals, couples, or other significant relationships. They will typically explore the beliefs, behaviours, and relationships within the family to facilitate and engage members to share understanding and views with each other. This can enable the various individuals to better understand the issues they are experiencing that are causing concern and explore ways forward that work for them.

Family and systemic psychotherapists draw on systemic approaches, theories and techniques with their clients and their networks to understand and address issues causing concern. This can help families to improve communication between members and with significant others outside of the family by making interactions more effective and productive. Improved communication can help individuals and families make important changes in the way they relate to each other and assist in resolving persistent patterns of conflict.

Typically, family members are seen together for therapy sessions, but family and systemic psychotherapists may work with individuals, couples, or combinations of family members. This depends on who is available and what the presenting and emerging concerns are. Clients can be seen in a mental health or social care consulting rooms and sometimes in their own homes. They can also be seen in formal family therapy clinics and in training contexts.

The clients that family and systemic psychotherapists engage may be experiencing high levels of distress. This may manifest in a range of ways such as depression, anxiety, acts of self-harm, high expressed emotion or eating disorders. They will undertake a detailed initial assessment discussion with their clients focusing on complex, sensitive and personal information related to their mental health difficulties. This will also require the therapist to undertake and complete risk assessments, risk formulation and risk management for their clients. From this they will then be required to draw upon this complex assessment material to provide verbal and written systemic formulations that will support evidence-based interventions for the individual, couple, or family they are working with.

In their daily work, an employee in this occupation interacts with the wider team in the organisation within which they are embedded, along with external professionals and networks. This may include:

- medical practitioners, psychiatrists, psychologists, paediatricians, nurses, occupational therapists, administration and other hospital staff
- psychotherapists: art psychotherapists, cognitive behavioural therapists, child psychotherapists, cognitive analytic psychotherapists
- community and specialist social workers, such as fostering and adoption

- NHS and social care managers
- schools and college staff
- probation service, police officers and youth offending services
- palliative care staff
- staff in mental health charitable organisations
- charities
- housing benefit staff

An employee in this occupation will be responsible for:

- acting autonomously within agreed limits set by the protocols of their employing organisation and in negotiation with their supervisor
- implementing a range of systemic interventions for individuals, families, couples, their wider networks and professional networks
- providing formal written reports on their work as well as other keeping accurate records
- autonomous liaison with internal clinical colleagues and outside agencies
- co-constructing with each client a realistic and appropriate care plan within the resources of the employing organisation
- co-constructing with each client a systemic risk assessment, the accuracy and appropriateness of which will be regularly appraised, monitored, and updated over time
- participating in and contributing to multidisciplinary meetings, team meetings, child safeguarding case conferences, reviews, and network meetings
- adhering to and working with relevant clinical and ethical frameworks and codes of practice
- participating in and contributing to both managerial and clinical supervision
- contributing to service evaluations
- contributing to the organisation's training agenda
- contributing to leadership, providing feedback on systemic psychotherapy within the organisation
- participate in personal learning, identify areas of personal strength and learning needs, seeking, and responding to support and feedback
- maintaining up to date knowledge in their field of practice and taking part in continuing professional development

Typical job titles

Family and systemic psychotherapist Family therapist

Systemic psychotherapist

Are there any statutory/regulatory or other typical entry requirements?

Yes

Entry requirements

Individuals will need to: have completed AFT-accredited Foundation and Intermediate Level training in Systemic Practice and be registered as a Health or Social Care Professional or be able to demonstrate that they meet the AFT UKCP's Accredited Prior Experiential Learning (APEL) requirements for professional status. APEL Process AFT stipulate the necessary competencies that need to be assessed and these are evaluated by AFT-accredited Higher Education providers through a process of portfolio submission and formal interview. Accredited courses are required to evidence their APEL processes to AFT to ensure consistency and rigour.

Occupation duties

DUTY	KSBS
Duty 1 Be an ethically accountable and autonomous professional by placing service user needs at the centre of practice whilst adhering to professional standards, workplace routines, policies and protocols.	K1 K2 K3 K4
	S1 S2 S3
	B1 B2 B3 B4 B5 B6
Duty 2 Undertake risk assessments, risk formulation and risk management to inform multi agency understandings, decision making and actions.	К5 К6 К7
	S4 S5 S6 S7 S8
	B1 B2 B3 B4 B5 B6
Duty 3 Undertake detailed and specialist systemic assessments.	K8 K9 K10 K11 K12 K13 K14
	S9 S10
	B1 B2 B3 B4 B5 B6
Duty 4 Draw upon complex assessment material to provide verbal and written, evidence-based systemic hypotheses and collaborative formulations to agree the appropriate packages of therapeutic and or multi-agency care.	K15 K16 K17 K18
	S11 S12 S13 S14
	B1 B2 B3 B4 B5 B6
Duty 5 Plan a broad range of systemic interventions, taking into account child and adult development processes, the life cycle of families and personal and professional systems surrounding the individual.	K19 K20 K21
	S15 S16 S17 S18 S19
	B1 B2 B3 B4 B5 B6
Duty 6 Implement agreed therapeutic interventions, revising therapeutic plans as appropriate during the work, including utilising outcome measures and planning for endings.	K22 K23 K24 K25 K26
	S20 S21 S22 S23 S24 S25
	B1 B2 B3 B4 B5 B6
Duty 7 Develop and maintain therapeutic relationships, working collaboratively within highly distressing, emotionally charged and challenging circumstances, whilst managing own, and other's wellbeing.	K27 K28 K29 K30
	S26 S27 S28 S29 S30 S31
	B1 B2 B3 B4 B5 B6

Duty 8 Develop and maintain positive working relationships, promoting equality, diversity, inclusion, and Human Rights in one's own working practices.	K31 K32 K33 K34 K35 S32 S33 S34 B1 B2 B3 B4 B5 B6
Duty 9 Participate in and contribute to regular clinical and management supervision to evaluate own systemic practice and implications of therapeutic interventions.	K36 K37 K38 K39 K40 K41 S35 S36 S37 S38 S39 B1 B2 B3 B4 B5 B6
Duty 10 Undertake research relevant to own field of systemic practice.	K42 K43 K44 K45 K46 K47 S40 S41 S42 S43 B1 B2 B3 B4 B5 B6
Duty 11 Provide specialist systemic guidance, consultation and training to professional colleagues on the use of family therapy and systemic psychotherapy techniques.	K48 K49 K50 K51 S44 S45 S46 S47 S48 B1 B2 B3 B4 B5 B6
Duty 12 Participate in and contribute to multidisciplinary and multi-agency meetings.	K52 K53 S49 S50 B1 B2 B3 B4 B5 B6
Duty 13 Create and maintain accurate records that adhere to professional and organisational codes of practice.	K54 K55 S51 S52 B1 B2 B3 B4 B5 B6

KSBs

Knowledge

K1: The Association of Family Therapists (AFT) and UK Council for Counselling and Psychotherapy (UKCP) codes of ethics and practice.

K2: Statutory and legal frameworks that surround and inform practice contexts.

K3: National and local clinical governance guidelines and policies.

K4: The principles of confidentiality, consent its limits, and the specific conditions when it is appropriate to breach confidentiality.

K5: Models of risk assessment and the practice of ongoing risk management.

K6: Policies and practices needed in relation to safeguarding children and vulnerable adults and the role of the systemic psychotherapist in relation to this.

K7: Policies and processes for reporting and escalating risks, hazards or harms to self, the individuals, or others.

K8: Theories and research that informs assessment.

K9: Current evidence based systemic models of assessment.

K10: Models for determining patterns of distress.

K11: Societal factors that cause, maintain and exacerbate relational distress, physical and mental ill health.

K12: Diverse family values, structures and close interpersonal relationships.

K13: Information necessary to inform a systemic assessment.

K14: Mental health problems, their presentations, interventions, and the ways in which they may affect relationships.

K15: Models of human development and human relationships throughout the lifecycle of family and other relational systems.

K16: Biopsychosocial approaches to distress and mental health problems.

K17: Systemic model, theories and their limitations underpinning systemic psychotherapy and their applications to different situations and groups.

K18: Systems and processes for making referrals to internal or external teams or agencies.

K19: Systemic theories that enable change.

K20: How different systemic models and techniques can be used to meet the needs of diverse communities, relationships and individuals' life choices.

K21: Techniques and interventions used in systemic psychotherapy.

K22: Systemic models and theories that underpin systemic psychotherapy and their applications and limitations to different situations and groups.

K23: An approach to family therapy that is a manualised evidenced based protocol.

K24: When to revise the therapeutic plan.

K25: Outcomes measures and approaches that inform and evaluate practice.

K26: The process of online systemic psychotherapy.

K27: Factors that underpin a therapeutic alliance and engagement.

K28: Models, approaches and actions to be followed for planned and unplanned therapeutic endings.

K29: The therapeutic and emotional processes of ending therapeutic work for individuals, systems and therapists.

K30: The use of self and consideration of power within the therapeutic relationship.

K31: Anti-discriminatory and anti-oppressive practice.

K32: The importance of partnership working with community groups and experts by experience in tackling racial, social and health inequalities.

K33: The influence of health and social inequalities on individual and family wellbeing.

K34: Culturally sensitive practices.

K35: Principals of co-production.

K36: Theoretically informed approaches to supervision both as a supervisee and as a supervisor.

K37: Own role in developing an effective supervision relationship.

K38: Principles of reflective and reflexive practice.

K39: The process of personal development planning.

K40: Differences between clinical and management supervision.

K41: The limits of own personal expertise and skills.

K42: Quantitative and qualitative research methodologies relevant to the situation and service context.

K43: Critical evaluation techniques applied to evidence and practice based research findings.

K44: How research is conducted and implemented to inform effectiveness in systemic practice.

K45: Legal, ethical, professional, financial and organisational policies and procedures that apply to clinical research activities.

K46: A range of research approaches that draw on specialist systemic tools to collect data to evaluate own practice as well as to enhance service delivery.

K47: How knowledge of evidence-based practice is applied by supporting others in planning audit, evaluation and research of their work.

K48: Adult learning theories.

K49: The range of tools and techniques that can be used to support learning, set goals and evaluate learning.

K50: The impact of engaging with others to enhance reflective and reflexive practice in a range of learning and service settings.

K51: Principles of systemic leadership and how this can be applied to working in teams.

K52: Principles, roles and responsibilities of multidisciplinary working and their effect on service delivery.

K53: The use of self and consideration of power within the multidisciplinary or multi-agency team.

K54: Principles of handling clinical information and knowing how and when to share this information.

K55: The importance of providing and maintaining clear, concise, timely and factual clinical records.

Skills

S1: Act in accordance with the Association of Family Therapists (AFT) and UK Council for Counselling and Psychotherapy (UKCP) codes of ethics and practice.

S2: Adopt a rights-based approach consistent with national and service standards.

S3: Act in accordance with national and local clinical governance, standards and policies.

S4: Communicate the range of options to enable choice, decision-making and informed consent.

S5: Work collaboratively to manage the ongoing nature of risk.

S6: Report and escalate concerns around risk, hazards, or harms to self, individuals and others.

S7: Act within organisational and national safeguarding policies and procedures.

S8: Work with individuals to understand safeguarding concerns and effectively communicate safeguarding processes in line with national safeguarding confidentiality and sharing information guidance.

S9: Undertake a detailed and collaborative systemic assessment of the presenting concerns.

\$10: Use theories and research findings to inform assessment and formulation.

S11: Collaboratively develop a systemic formulation.

\$12: Adapt assessments to fit the needs of individuals across the life span.

\$13: Communicate complex assessment material in both oral and written forms as appropriate.

S14: Recognise the limits of a systemic approach and make referrals to internal or external professionals based on need when required.

\$15: Co-create a context in which change becomes possible.

S16: Use outcome measures to inform the therapeutic plan.

\$17: Collaboratively agree the therapeutic plan.

S18: Adapt the therapeutic plan to take account of emotional distress and mental health difficulties.

S19: Adapt the therapeutic plan to take account of the needs of diverse communities, relationships and individuals life choices.

S20: Deliver systemic psychotherapy.

S21: Revise therapeutic plans as appropriate during the work.

S22: Apply interventions with flexibility and creativity, adapting them to meet the individuals needs.

\$23: Deliver systemic psychotherapy using a range of digital media.

S24: Use outcomes measures and qualitative approaches and adjust the therapy accordingly.

\$25: Use outcome measures and qualitative approaches to assess the therapeutic alliance.

S26: Develop and maintain effective therapeutic relationships even when there are different views and goals.

S27: Communicate clinically sensitive information.

S28: Act in a self and relationally reflexive manner in relation to others.

S29: Attend to power and differences in respect to human identity, relationships, and experience.

S30: Gauge and manage emotions within sessions, including own, so that vulnerable members are protected in situations of discomfort and tension and important issues which may be contentious, or distressing can be explored safely.

S31: Manage planned and unplanned endings of the therapeutic relationship.

S32: Promote anti-discriminatory practices.

S33: Promote equality, diversity and inclusion in practice and organisations.

S34: Promote social justice by acknowledging and responding to individuals experience of marginalisation.

S35: Prepare and actively engage in systemic supervision and live supervised practice to sustain safe and effective practice.

S36: Manage personal connections with the work and reflect on changes that could be made.

S37: Actively participate in personal learning and identify areas of personal strength and learning needs, seeking and responding to support and feedback.

S38: Identify and act on own well-being needs when faced with challenging, distressing, or abusive behaviour.

S39: Recognise the limits of own personal expertise and skills and where required refer individuals to internal or external professionals based on the need.

S40: Evaluate research evidence and outcomes to take an evidence-based approach to systemic practice.

S41: Engage in research activity applying quantitative and qualitative methods within the context of own practice.

S42: Evaluate and audit systemic practice through conducting service evaluations to inform change.

S43: Disseminate clinically relevant research and service evaluation findings to individuals and or groups.

S44: Form and maintain the leadership-follower relationship in ways that are mutually enhancing.

S45: Provide a systemic perspective to colleagues.

S46: Work collaboratively to identify and meet the learning and development needs of professional colleagues.

S47: Provide constructive feedback to challenge and overcome barriers to implementation of best systemic practice to others.

S48: Present systemic principles and techniques to individuals and or groups.

S49: Develop and sustain collaborative relationships with colleagues from a range of disciplines and backgrounds surrounding the individual.

\$50: Act in a self and relationally reflexive manner in relation to professional self.

S51: Produce and maintain clear, legible and contemporaneous records regarding direct and indirect contacts adhering to organisational, professional and ethical standards.

S52: Use clinical record systems in accordance with national and local governance requirements.

Behaviours

B1: Inclusive and culturally sensitive.

B2: Value lived experiences and partnership working.

B3: Treat individuals with dignity, empathy and compassion.

B4: Trustworthy, honest and act with integrity.

B5: Open and transparent putting best interests of the individual first.

B6: Committed to supporting individuals to become empowered.

Qualifications

English and Maths

Apprentices without level 2 English and maths will need to achieve this level prior to taking the End-Point Assessment. For those with an education, health and care plan or a legacy statement, the apprenticeship's English and maths minimum requirement is Entry Level 3. A British Sign Language (BSL) qualification is an alternative to the English qualification for those whose primary language is BSL.

Does the apprenticeship need to include any mandated qualifications in addition to the above-mentioned English and maths qualifications?

Yes

Other mandatory qualifications

MSc in Systemic Family Therapy accredited by the Association of Family Therapy and Systemic Practice

Level: 7 (integrated degree)

Professional recognition

This standard aligns with the following professional recognition:

- Association of Family Therapy and Systemic Practice (AFT) for Qualifying Level
- United Kingdom Council for Psychotherapy (UKCP) for Full Clinical Membership

Consultation

A public consultation was conducted via the HASO website between 15th November and 20th December 2023. There were 52 responses to the consultation. Of these 13 were complete and 39 were partial responses.

The feedback has led to a range of revisions to the overview and the KSB which have been agreed with the Co-Chairs.

Progression Routes

ST0385 Operations or departmental manager L5

ST0480 Senior leader 1.1 L7

Supporting uploads

Mandatory qualification uploads

Mandated degree evidence uploads

Professional body confirmation uploads

Subject sector area

1.1 Medicine and dentistry