North East and Cumbria Branch

Taking Experience Seriously in Psychosis  
Presented by Isabel Clarke  
Friday 24 November 2017

**Venue -** Royal Station Hotel, Neville Street, Newcastle upon Tyne, NE1 5DH [www.royalstationhotel.com](http://www.royalstationhotel.com)

**Times -** 9.30am to 4.30pm, registration and refreshments from 9.00am

**About the workshop**

Engagement is frequently the obstacle to take up in CBT for Psychosis. Many of the people who could benefit from this therapy do not accept diagnostic labels and do not necessarily want their experiences to be eliminated. Research shows that this ‘lack of insight’ actually preserves self-esteem (Harder 2006).

This workshop introduces an approach that takes their experience and how they make sense of it seriously, and uses this to build engagement to work with the services to manage the experiences and any associated risk. The approach incorporates mindfulness (Chadwick, Newman-Taylor & Abba 2005) and maps psychosis onto the Dialectical Behaviour Therapy States of Mind diagram. This enables the range of DBT skills to be used to manage psychosis.

The workshop will include practical exercises and is suitable for anyone who works with, or has an interest in, psychosis.

**Relevant publications**

Owen, M., Sellwood, W., Kan, S., Murray, J., & Sarsam, M.(2015). Group CBT for psychosis: A longitudinal, controlled trial with inpatients. *Behaviour Research and Therapy* 65, 76 -85

Clarke, I. (2013) Spirituality: a new way into understanding psychosis. In E.M.J. Morris, L.C.Johns & J.E.Oliver Eds. *Acceptance and Commitment Therapy and Mindfulness for Psychosis*. Chichester: Wiley-Blackwell.P.160-171

**About the workshop leader**

Isabel Clarke is a consultant clinical psychologist with over 20 years’ experience working as a therapist in the NHS with people with complex problems.  The edited, Clarke, I. & Wilson, (2008) Cognitive Behaviour Therapy for Acute Inpatient Mental Health Units covers an innovative approach to acute services which are currently being applied in IAPT (publication to follow).

Her books, Psychosis and Spirituality; Consolidating the new Paradigm (Wiley 2010) and Madness, Mystery and the Survival of God (2008, O-Books) explore the themes of spirituality, mental health and being human.

See [www.isabelclarke.org](http://www.isabelclarke.org) for more information on publications and activities.

**Registration Information**

BABCP Member: £50 Non-member: £70

Price includes a buffet lunch and tea / coffee at registration, morning and afternoon breaks.

A certificate will be provided for 7 hours CPD.

Registration close date – **Friday 17 November 2017**

**Cancellation Policy**

The registration fee will be refunded **minus a £15 administration charge** if cancellations are received in writing to the BABCP Office, Imperial House, Hornby Street, Bury, BL9 5BN, or to [workshops@babcp.com](mailto:workshops@babcp.com), at least two weeks before the workshop date.

***Cancellations within two weeks of the event date are charged the full registration fee, other than in exceptional circumstances which can be verified.***

In the event of cancellation of the course outside of our control we will not be held accountable for travel and/or accommodation costs incurred. However the workshop fees will be refunded.

For other queries please call the BABCP office on 0161 705 4304.

**Transferring places between workshops** - Any cancellation of a place on the workshop will incur the relevant cancellation fee. If the registrant wishes to use the remainder of the fee in payment or part payment of another workshop the £15 administration fee will be deducted providing the cancellation is more than two weeks before the event date. If a cancellation is made within two weeks of the event date no refund will be available to transfer to another workshop.

**Replacing delegates** - If a delegate is unable to attend and a replacement is nominated there may be a charge depending on the individual circumstances, this will be advised at the time.  Please contact the BABCP to request a replacement of delegates at least a week before the workshop date.

**Ref: NEC281-17**



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| **Surname** |  | | **First Name** |  | **Title** |  |
| **Telephone** |  | | **E-Mail** |  | | |
| **Mailing Address** | **Post Code** | | | | | |
| **Payment**  Workshop payments are due by 17/11/17  **Card payments**  Debit card - no fee  Credit card - 2% processing fee | £50 BABCP Member  £70 Non-Member  Cheque enclosed (payable to BABCP)  Debit Card  Credit Card (2%fee)  Card Type (i.e. Visa, MasterCard)  We are unable to accept American Express  Name on Card  Card Number   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   Expiry Date: mm/yy **/** Security Code | | | | | |
|  | **Invoice:** Please complete page 4. Places are secured on payment.  Invoices will not be issued unless all the required information is entered.  Last date for invoicing – 03/11/17 | | | | | |
| Please state any special dietary or access requirements: | | | | | | |
| **Please return your registration form to:** | | | | | | |
| *Post:* **BABCP Workshops**  **Imperial House**  **Hornby Street**  **BURY**  **BL9 5BN** | | *Fax:* 0161 705 4306  *E-mail:* workshops@babcp.com | | | | |

**By registering on this event you are acknowledging acceptance of the cancellation policy on page two of this form**

**INVOICES**

If you wish to have an invoice sent for payment of the workshop registration fee please ensure that you have completed the registration form with your contact details

*All registrations are treated as provisional until the payment is received, a confirmation of a place on the workshop will only be sent to the delegate on receipt of the registration fee.*

By signing this document for invoicing the invoicee is promising to make payment for the delegate by the due date stated on the invoice. In the event of the payment not being made by the due date a place cannot be guaranteed on the workshop and if the named person then attends the workshop payment will become due immediately. In such circumstance if the invoicee subsequently fails to make payment the delegate assumes responsibility for paying the workshop registration fee.

**\*This document must be signed by both the delegate and the invoicee and for NHS authorities, either an official order or and order/reference number must be supplied before any invoice can be raised.**

Name of delegate: **required**

Contact name for invoice queries: **required**

Invoice contact telephone number: **required**

Order or reference number if used\*:

Organisation to be invoiced **required:**

Invoice to be addressed to (name or position)

Department (if relevant):

Invoice contact email address: **required**

Address for invoice: **required**

**Declaration: all invoices must have both parts of the declaration signed. Entering a name in the signed field is accepted as a signature and is binding.**

**Invoicee:** **required** I (name)     ,

on behalf of the organisation named above agree to the terms of this invoice, I understand that the named delegate will only be accepted on to this event when payment has been made and that, in circumstances where places are limited on an event, a place cannot be held indefinitely. I agree that, should payment not be made before the due date or before places have been filled by other delegates who have made payment, the named delegate will not be allocated a place and in the event that the named delegate attends the workshop and is granted access payment will be made on that day.

Signed: **required**

**Registrant: required**  I (name)     ,

acknowledge that my place on the workshop is only provisional until such time that payment has been made and that if payment is delayed and there are other paying registrants a place cannot be held open. I agree that in the event that I attend the workshop without payment being made and the invoicee above fails to make payment I will be responsible for paying the registration fee and would do so within seven days of the workshop.

Signed: **required**