

**EMDR EUROPE ACCREDITED CLINICAL SUPERVISOR/ CONSULTANT.
COMPETENCY BASED FRAMEWORK
EMDR EUROPE PRACTICE COMMITTEE – NOVEMBER 2020**

EMDR Europe Clinical Supervisor/ Consultant Evidence Checklist
Part A: EMDR Europe Minimum Requirements
Part B: EMDR Clinical Practice
Part C: EMDR Supervision and Teaching Skills & EMDR Consultation of Consultation (20 Hours)

EMDR Europe Clinical Supervisor/ Consultant Evidence Checklist PART A: EMDR EUROPE MINIMUM REQUIREMENTS	Please circle appropriate box	
That the applicant is a member of their respective EMDR National Association?	Yes	No
To your knowledge the Applicant adheres to the Professional and Ethical Standards as defined by both the applicant's professional registration body and the EMDR National Association and consistently promotes integrity in the science, teaching and clinical practice of psychotherapy and in particular that of EMDR	Yes	No
That the applicant is engaged in a minimum of 16 hours per week practicing psychotherapy (including supervising)	Yes	No
As a Clinical Supervisor/ Consultant you have seen copies of the applicant's professional registration certificates and where necessary evidence of their indemnity insurance?	Yes	No
The applicant has a minimum of 3 years' experience of being an EMDR Europe Practitioner.	Yes	No
The applicant has treated a broad range of clients of varying diagnoses and complexity.	Yes	No
The applicant has conducted a minimum of 400 EMDR sessions since becoming an EMDR Europe Accredited Practitioner	Yes	No
The applicant has treated a minimum of 75 clients utilising EMDR since becoming an EMDR Europe Accredited Practitioner	Yes	No
The applicant has demonstrated competency in both their provision of clinical supervision/ consultation and of their clinical work and have engaged in a minimum of 20 hours clinical supervision/ consultant with an EMDR Europe Accredited Consultant	Yes	No
You have seen the second reference in support of the applicant's application	Yes	No
You have seen the Certificate of Competency from the EMDR Europe Consultants training and had feedback from a Consultant Trainer regarding the applicant	Yes	No
Can confirm that since becoming an EMDR Europe Accredited Practitioner the applicant has undertaken a minimum of 30 hours EMDR related Continuing Professional Development (CPD) and aware current EMDR research	Yes	No
That you have witnessed a minimum of three DVD's, or in-vivo sessions meeting the required standard, of the applicant's professional practice of which one must be clinical, the second of them providing individual EMDR clinical supervision and the third of them providing Group EMDR clinical supervision	Yes	No

PART B: EMDR CLINICAL PRACTICE

PLEASE PROVIDE DETAILED COMMENTS IN SUPPORT OF EACH COMPETENCY

Section A:

Standard EMDR-protocol and procedure

1. History Taking – Past, Present & Future, AIP Case conceptualisation, and treatment planning
2. Preparation
3. Assessment
 - Image
 - Negative cognition
 - Positive cognition
 - Validity of Cognition (VoC)
 - Emotions
 - SUD
 - Body location
4. Processing (Desensitisation)
 - Strategies for blocked processing and blocking beliefs
 - Acceleration/ Deceleration
 - Cognitive Interweaves
5. Installation of positive cognition
 - i. Including blocking beliefs
6. Body scan
7. Closing techniques
 - Complete session
 - Incomplete session
8. Re-evaluation

Section B:

Evidence of knowledge and experience of scripted protocols for specified populations and knowledge of research:

1. EMDR, Complex Post Traumatic Stress Disorder (C-PTSD), Primary & Secondary Structural Dissociation
2. EMDR with Anxiety Disorders
3. EMDR and Clients with addictive behaviours
4. EMDR and Client's with Pain
5. EMDR Protocols for acute trauma (Recent Events Protocol)
6. EMDR & Traumatic Bereavement, Grief & Mourning
7. EMDR with Depression

**PART C EMDR THERAPY SUPERVISION AND TEACHING SKILLS & CONSULTATION OF
CONSULTATION (20 HOURS)**

PLEASE PROVIDE DETAILED COMMENTS IN SUPPORT OF EACH COMPETENCY

Basic approach and attitude towards supervisee's, duties and responsibilities:

- Development of a co-operative clinical supervision alliance with supervisees
- Demonstration of a high level of professional attitude and competence

Rapport building with Supervisees

- Create a safe atmosphere within clinical supervision
- Providing adequate and constructive feedback to supervisees
- Developing an effective attunement and adequate coaching style

Ability to transfer knowledge effectively to the theoretical framework of Adaptive Information Processing (AIP)

Focuses in supervision on following issues:

- Practice of the Standard EMDR Protocol
- Correct application of the protocol
- Acknowledge recognition to other approaches or treatment plans and interventions
- Demonstrate an ability to answer supervisees questions effectively, considering the following:
 - a. Explore and clarify the question
 - b. Answer from a theoretical background
 - c. Answer on a practical level
 - d. Give specific hints and suggestions for specific case
 - e. Teach about differential diagnosis and / or alternative treatments

Identify and effectively manage group processes

Signature of EMDR Europe Approved Clinical Supervisor/Consultant/ Trainer:

..... **Printed Name:**

Date:

EMDR Europe Practice Committee [November 2020]

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Second Reference in Support of an Application for EMDR Europe Accreditation

This reference forms part of the application process for accreditation as an EMDR Europe Clinical Supervisor/ Consultant

I support this application for EMDR Europe Accreditation as an EMDR Europe Clinical Supervisor/ Consultant for:

Name of Applicant:.....

I know the applicant from the following context:

Please Tick

<input type="checkbox"/>	Head of Service/ Clinical Manager
<input type="checkbox"/>	Professional Colleague
<input type="checkbox"/>	Academic Colleague
<input type="checkbox"/>	Clinical Supervision Group member

I can confirm the applicant’s experience in the practice of EMDR and that the applicant’s professional practice is in accordance with the ethical guidelines of their respective professional organisation.

Please print

name:.....

Signature:.....

Date:.....