Pre-supervision notes on becoming an EMDR Europe Accredited EMDR Consultant (EMDR Europe criteria):

Supervision with David Blore, York, UK

These notes, which are not exhaustive, are intended to provide you with guidance on becoming an Accredited EMDR Consultant and specifically the method of carrying out the Accreditation process that I currently adopt. If you haven’t already done so, I strongly suggest you download the relevant document (currently a shorter document than that for applying to become an Accredited Practitioner):

www.emdrassociation.org.uk/training/consultants_accreditation.htm

Please read Part A carefully and discuss with me immediately if you are likely to have problems meeting any of the criteria. For instance, please note you need to be working for a minimum of 16 hours in clinical/supervisory practice and this may be an issue for some part-time workers. Please discuss if you have any doubts.

Please bear in mind the downloaded document detail the minimum EMDR Europe criteria. It is also important to be aware that EMDR Europe periodically reassesses the criteria for Accreditation anyway. Having been a facilitator at numerous EMDR trainings since 1997 and conducted many hundreds of supervision hours at both levels of Accreditation, I have added a few criteria of my own as I know these will not only help you with your Accreditation, but will make the process of assessing competency truly robust. Where I have added (see below) to the minimum criteria I have written text as follows: *text*. Again if you have any questions, please ask.

Overview

Accreditation as an EMDR Consultant requires two major components: Enhanced clinical experience and provision of supervision. This is clearly demonstrated by the EMDR Europe competency assessments. It is important not to gauge your progress merely on the number of hours of supervision. The 20 hours of supervision required is merely a minimum requirement. Indeed, just as with the Accredited Practitionership, it is passing the competency assessments that is crucial.

Clinical and supervision

In the case of Consultant Accreditation, EMDR Europe requires a minimum of 75 clients and 300 sessions. I’m sure you would agree it is important that your clinical use of EMDR clearly builds on your previous Accreditation as a Practitioner and slightly greater focus will be spent on why a given client was not suitable for EMDR; why a given client dropped out of EMDR and, specifically, your extended use of EMDR (i.e. not merely for PTSD clients). The way by which progress will be monitored is two-fold:

a) By keeping a *clinical experience log* which you will need to submit to me before paperwork is completed. I will ask to see the log periodically so it is best to keep it in an electronic form. How the log is set out will be a matter for discussion, but please don’t see this as an ‘arduous extra task’. Consistently feedback is that it is extremely useful.

b) I also ask you to submit something for *peer review publication/presentation* during your supervision (as long as it is about EMDR you can pick any subject). This too is not arduous and several avenues can be explored in supervision such as contribution to the Autumn Workshops, National or even European Conferences. Feedback from supervisees is always very positive and clearly confidence-boosting.

Please note that EMDR Europe also has a CPD requirement of 24 hours in addition to supervision as well as three competency assessments, one of which is a clinical assessment. Please note that almost always I request that these are conducted in vivo. Experience shows
that DVDs either frequently require redoing or on questioning the supervisee, he/she finds it is difficult to recall the context/detail of the process in the session. If conducting assessments live is an issue for your NHS Trust – or for that matter your client, then please make sure you discuss this with me in plenty of time beforehand.

<table>
<thead>
<tr>
<th>Competency assessment</th>
<th>The session</th>
<th>Afterwards</th>
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<tbody>
<tr>
<td>Clinical competency assessment: Aim to establish clinical competency and broadening of experience and expertise has taken place</td>
<td>One hour clinical session with 15 minutes beforehand to orientate the assessor to the clinical situation to be encountered</td>
<td>Half an hour of questioning, discussion, and exploring alternative strategies</td>
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<tr>
<td>Group supervision assessment: Aim to demonstrate how clinical competency in others is being positively shaped</td>
<td>Two hour supervision session with 15 minutes beforehand to orientate the assessor to the learning level of supervisees and potential material to be encountered</td>
<td>Half an hour of questioning, discussion, and exploring alternative strategies</td>
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<tr>
<td>Individual supervision assessment: Aim to demonstrate how clinical competency in another is being positively shaped</td>
<td>One hour supervision session with 15 minutes beforehand to orientate the assessor to the learning level of the supervisee and potential material to be encountered</td>
<td>Half an hour of questioning, discussion, and exploring alternative strategies</td>
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Overview of competency assessments for Accredited Consultantship
Total hours above: 6.25 hours minimum

As regards timing of supervision I would like you to take the lead in deciding when that needs to take place rather than having a ‘blanket’ 4-week slot. Furthermore, don’t neglect the EMDR literature. Adapting to the latest peer-reviewed publications helps with not only the supervision you provide, but prevents you from slipping into bad habits such as “I’ve always done it this way”. As appropriate, I will ask you to *critique a paper in supervision*. Don’t lose sight of the adage: “The day we stop learning is the day we retire from clinical and supervisory practice”.

Finally, and in negotiation between me, you and Sandi Richman the Consultant Trainer, you will need to attend a 4-day Consultant training, received both a Certificate of Competency and written feedback. Although you should go to the training to demonstrate your abilities it is important to be aware that there may still be some honing of skills to do. My final additional criteria is: *you must discuss any points in Sandi’s report with myself, and between us construct an action plan and deadline for achieving that plan*.

I hope this helps smooth the path to becoming an Accredited EMDR Consultant, and I wish you all the very best on what will be an exciting journey for both of us.

Kind regards

Dr David Blore PhD
EMDR Consultant and Training facilitator
Specialist Lecturer, Teesside University, UK
Principal: eSSENTIAL training consultancy
Preferred provider of EMDR supervision to both accredited competency levels
david.blore@btinternet.com www.davidblore.co.uk
24 voicemail: +44(0)7976 933096
Author of: “In Search of the Antonym to Trauma”