



**Ag Rialáil Gairmithe Sláinte
agus Cúraim Shóisialaigh**

**Regulating Health +
Social Care Professionals**

Counsellors and Psychotherapists Registration Board

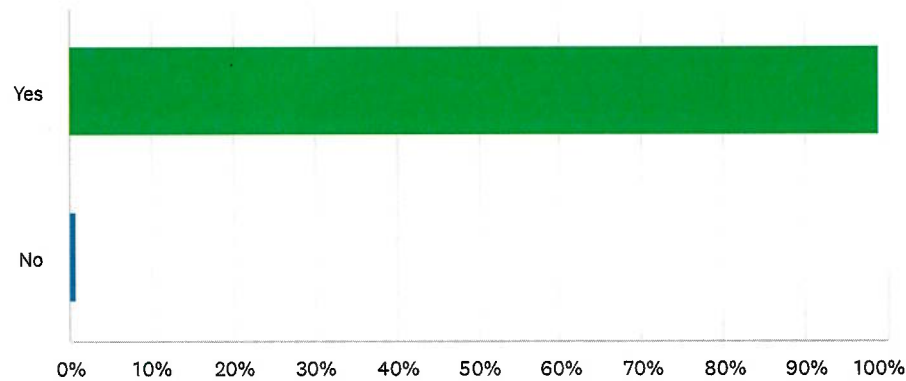
***Consultation on the Standards of Proficiency
for Psychotherapists and Criteria for Education
and Training Programmes (Psychotherapists)***

Online Questionnaire Responses

Consultation Period: 4 September 2023 – 1 December 2023

Q1 Do you agree to the terms above? By selecting Yes you are confirming that you consent to providing your answers to the questions in this survey.

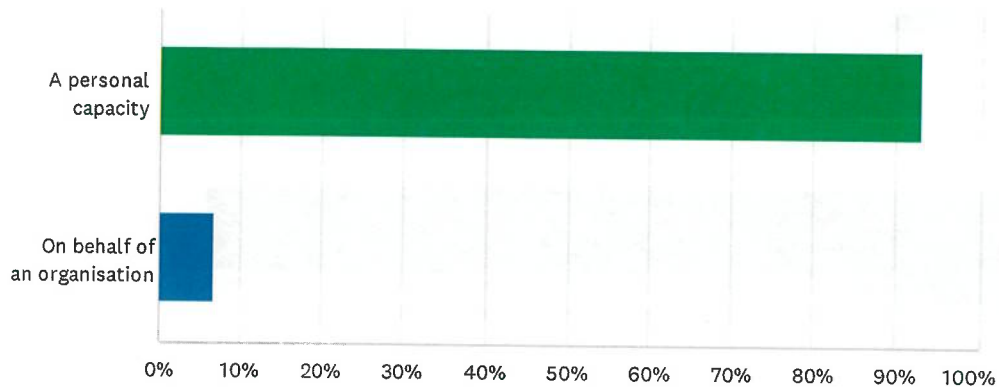
Answered: 428 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	99.07%	424
No	0.93%	4
TOTAL		428

Q2 Are you contributing to this survey in:

Answered: 421 Skipped: 7



ANSWER CHOICES	RESPONSES	
A personal capacity	93.11%	392
On behalf of an organisation	6.89%	29
TOTAL		421

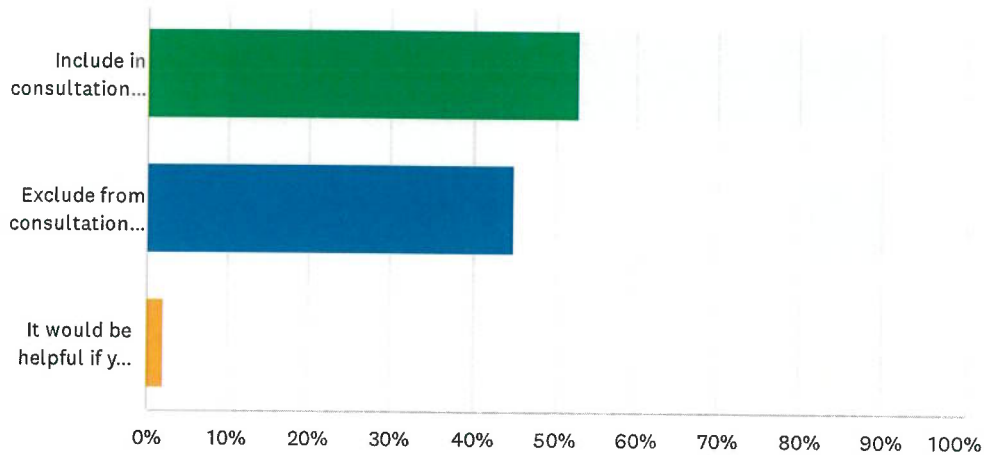
#	IF ON BEHALF OF AN ORGANISATION, PLEASE SPECIFY:	DATE
1	The School of Psychotherapy at SVUH	12/1/2023 4:56 PM
2	Family Therapy Association of Ireland FTAI	12/1/2023 3:14 PM
3	Institute of Clinical Hypnotherapy & Psychotherapy	12/1/2023 2:47 PM
4	Cognitive Behavioural Psychotherapy, Ireland (CBPI) modality section of the ICP (Irish Council for Psychotherapy)	12/1/2023 1:19 PM
5	Northside Counselling Service	12/1/2023 10:55 AM
6	Tracht Psychotherapy Foundation	11/30/2023 8:00 PM
7	One in Four	11/30/2023 3:42 PM
8	Irish Council for Psychotherapy (ICP)	11/30/2023 11:50 AM
9	Dublin Art Therapy College	11/30/2023 9:09 AM
10	Irish Association of Humanistic and Integrative Psychotherapy	11/29/2023 10:14 PM
11	UL	11/29/2023 10:56 AM
12	Bedford Row Family Project	11/28/2023 10:23 AM
13	IAHIP	11/23/2023 2:38 PM
14	nnn	11/22/2023 8:09 PM
15	IAHIP	11/22/2023 3:59 PM
16	IAHIP	11/22/2023 12:57 PM
17	IICP College, Killinarden Enterprise Park, Tallaght, Dublin D24 TKC7 Ireland	11/22/2023 10:09 AM
18	IFPP	11/22/2023 12:49 AM
19	Private Child & Adolescent Psychotherapy Practice	11/16/2023 9:30 PM
20	Gestalt Institute of Ireland	11/14/2023 4:48 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

21	Irish Association of Relationship Mentors (Psychotherapists)	11/12/2023 11:59 AM
22	Clanwilliam Institute	11/3/2023 11:35 AM
23	ICHAS	11/1/2023 11:35 AM
24	Munster Technological University Kerry	10/26/2023 7:53 PM
25	[REDACTED]	10/25/2023 2:31 PM
26	Health care	10/24/2023 10:02 PM
27	The Children's Therapy Centre (CTC)	10/21/2023 6:39 PM
28	ACAP	10/16/2023 4:58 AM
29	[REDACTED] I will be very clear that the level of expertise required to do this work is specialised and as such strongly believe that a level 8 qualification will not be an appropriate level.	10/10/2023 4:50 PM
30	D2counselling	9/19/2023 9:21 AM
31	n/a	9/13/2023 7:42 PM
32	The Association of Child Art Psychotherapists (ACAP)	9/5/2023 10:49 AM
33	Child Art Psychotherapy	9/4/2023 9:49 PM
34	Association of Child Art Psychotherapy	9/4/2023 8:39 PM

Q3 Please indicate if you would like your name and/or organisation to be kept confidential and excluded from the consultation report.

Answered: 411 Skipped: 17

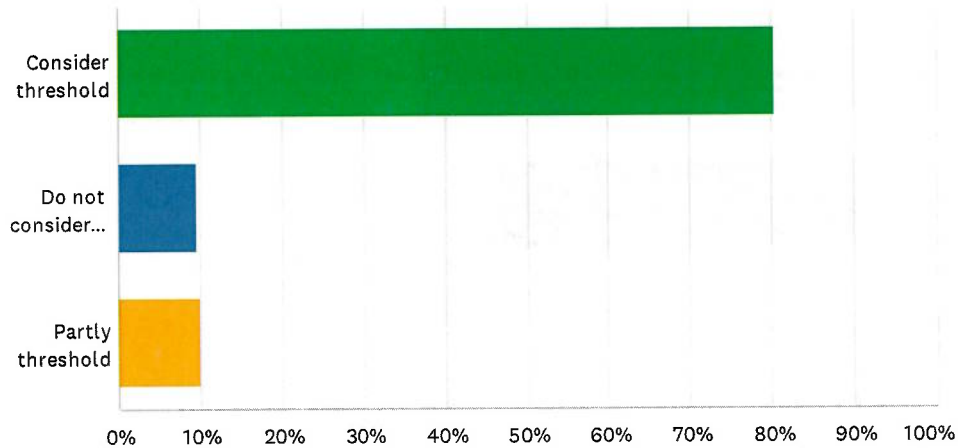


ANSWER CHOICES		RESPONSES	
Include in consultation report		52.80%	217
Exclude from consultation report		45.01%	185
It would be helpful if you could explain if you regard the information you have provided as confidential.		2.19%	9
TOTAL			411

#	IT WOULD BE HELPFUL IF YOU COULD EXPLAIN IF YOU REGARD THE INFORMATION YOU HAVE PROVIDED AS CONFIDENTIAL.	DATE
1		11/30/2023 11:52 AM
2		11/22/2023 11:28 PM
3		11/22/2023 8:09 PM
4		11/22/2023 4:14 PM
5		11/22/2023 2:59 PM
6		11/16/2023 9:30 PM
7		11/13/2023 9:09 PM
8		10/24/2023 10:02 PM
9		9/14/2023 1:14 PM

Q4 Standard 5.9 Be able to appraise the benefits, limitations and contradictions of differing psychotherapeutic approaches.

Answered: 189 Skipped: 239



ANSWER CHOICES	RESPONSES	
Consider threshold	80.42%	152
Do not consider threshold	9.52%	18
Partly threshold	10.05%	19
TOTAL		189

Q5 If you do not consider Standard 5.9 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 30 Skipped: 398

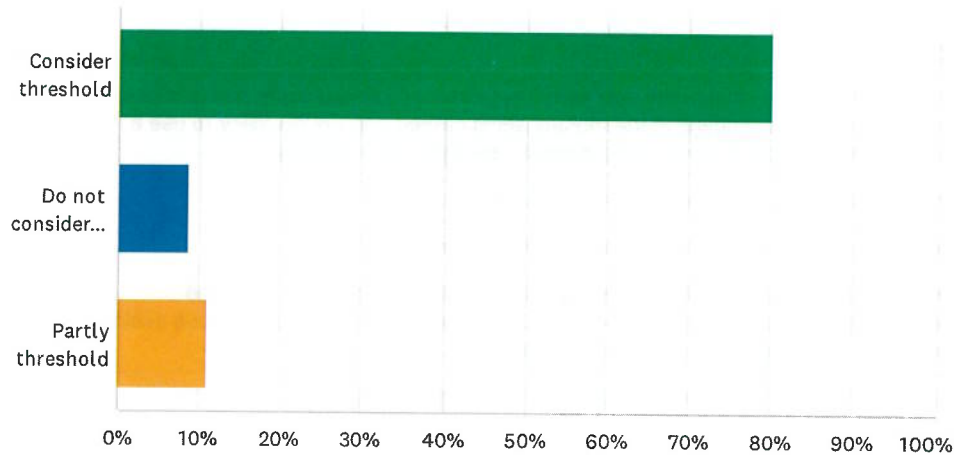
#	RESPONSES	DATE
1	It is not possible to train in every established modality of counselling or psychotherapy what is important it is threshold to appraise the benefits and limitations of the modality in which you are training.	12/1/2023 4:11 PM
2	The language of specific benefits may not fit as well in Psychotherapy as it does in other medical situations . Service users present with a variety of complexities and needs.Suggestion may be to :Demonstrate knowledge of different therapeutic approaches and their benefits to the service user.Also to have the awareness of approaches that are not helpful to the person that is attending for therapy. And to have the ability to be flexible and work with the service user collaboratively	12/1/2023 3:39 PM
3	It is good to have knowledge of different approaches, but the evidence isn't clear on the benefits or limitations of most styles.	12/1/2023 2:35 PM
4	This is a medical model and not about relationship. Flexibility, adaptability and suitability are key understandings required.	12/1/2023 1:19 AM
5	Needs more detail in relation to the differing therapeutic approaches.	11/30/2023 4:54 PM
6	The language is more akin to medical situations	11/30/2023 12:28 PM
7	Comment: The idea that approaches have specific 'benefits, limitations and contraindications' may not fit here as well as in a medical context.* Suggested revision: 'Demonstrate knowledge of different therapeutic approaches and what they seek to achieve.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession. [REDACTED]	11/30/2023 11:53 AM
8	Psychotherapy addresses complex life situations and experiences and and critical appraisal is necessary for safety, rather than simple appraisal. Furthermore complex service user presentations frequently requires integration of approaches. A wording that would reflect safe practice is "Be able to critically appraise the benefits, limitations and contraindications of differing psychotherapeutic approaches and, where required, integrate them in a coherent manner.	11/29/2023 5:27 PM
9	In general, I consider that the Professional Knowledge and Skills, presented in the Draft Standards of Proficiency for Psychotherapists, cause concern as, even while most are part of the current practice of psychotherapists, some are not at the appropriate level needed (being too low), and a number of highly important competencies are not included.	11/28/2023 8:41 PM
10	5.9 is not robust because there i) is not Personal Therapy component. ii) Level 9 NQLis necessary for entry requirements iii) Onsite observations do not comply with cliet GDPR requirments iv) the training standards are not robust enough . Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). . Have personally undergone a minimum of 250 hours of Psychotherapy. . An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 9:41 AM
11	Within 5.9 a Psyychotherapist can be qualified to collaboratively agree if a patient/client is suitable for the psychotherapy they are trained and competent in but cannot be expected nor should they go beyond this competency and comment on psychotherapy they are not competent in. The language used in 5.9 is a problem as it focus on 'psychotherapeutic approaches' not specific psychotherapy.	11/24/2023 10:31 AM
12	Threshold as it is important to be familiar with a varied number of psychotherapeutic approaches and to be proficient in practice of at least three.	11/23/2023 5:23 PM
13	The threshold is below the existing standards of the current psychotherapist professional bodies. The threshold should be at least Level 9	11/22/2023 6:26 PM
14	No personal therapy or development in the threshold. Level of competency below European	11/22/2023 5:59 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes
 standard - EAP No provision for trained and qualified supervisors
 (Psychotherapists)

15	In order to ensure safety and duty of care towards the clients and therapists it is necessary to make sure the therapist has the minimum level of educational qualification, learning experience (theory, practice, supervision, personal therapy etc) and skills	11/22/2023 5:21 PM
16	Throughout my 20 year career it has been understood and practised that psychotherapists are qualified to level 9 academically, as well as more years spent training to become accredited	11/22/2023 5:15 PM
17	Therapist working in the area of personal therapy have done so for many years with qualifications which they have added to over the years. Therapists have also completed years of CPD. Applying minimum standards which have only applied in recent years, seems very unfair to both therapist and potential clients.	11/22/2023 2:34 PM
18	This should read "a range of differing" to clearly indicate that the standard relates to some but not all psychotherapeutic approaches.	11/22/2023 10:13 AM
19	I think a Masters programme would give a stronger understanding of this and also offers an environment that promotes critical analysis and reflection.	11/14/2023 1:02 AM
20	The wording here is ambiguous. It also suggests that such appraisals may be made in an objective manner.	11/1/2023 4:38 PM
21	Level 9 is the appropriate threshold, as currently obtains	10/29/2023 12:44 PM
22	also to be able to identify personal limits and competence with models used and to be able to identify where a model not offered would be more beneficial to a client	10/20/2023 8:56 PM
23	The quality matters and the type of training and cpd and also the cl's feed back and progress defines the skill of Counsellor and psychotherapist but not her or his degree.	10/18/2023 5:41 PM
24	I agree this standard meets the threshold, however a level 8 graduate will not have the same level of knowledge, skill and understanding required to meet this standard as a level 9 graduate.	10/18/2023 11:00 AM
25	There is little or no difference between Psychotherapists and Counsellors in their functioning/role in assisting the public in their professional capacities.	10/10/2023 2:31 PM
26	Therapists are normally trained in a few different modalities of psychotherapy, it is not possible to know every type of modality. There are limitations to all modalities. However it is absolutely crucial for clinicians to understand their own limitations when helping another person and be able to communicate effectively if a client requires more than a clinician can offer	10/6/2023 12:33 PM
27	There is no consent, academically and internationally, as there is not sufficient research on what constitutes evidence based approaches. Therefore a standard for benefits, limitations and contra-indications cannot be set without sufficient academic evidence	10/3/2023 10:42 AM
28	standard too low undermines our profession should be a higher standard	9/13/2023 8:30 PM
29	Unsure as to what level of assessment would be required to showcase fully appraise it. Certainly a good understanding is needed	9/8/2023 2:33 PM
30	I think it is a complex skill that not all training courses especially specific ones will cover	9/7/2023 12:21 PM

Q6 Standard 5.10 Be able to apply a chosen theoretical model to assess the service users' suitability for the type of therapy offered.

Answered: 181 Skipped: 247



ANSWER CHOICES	RESPONSES	
Consider threshold	80.11%	145
Do not consider threshold	8.84%	16
Partly threshold	11.05%	20
TOTAL		181

Q7 If you do not consider Standard 5.10 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 29 Skipped: 399

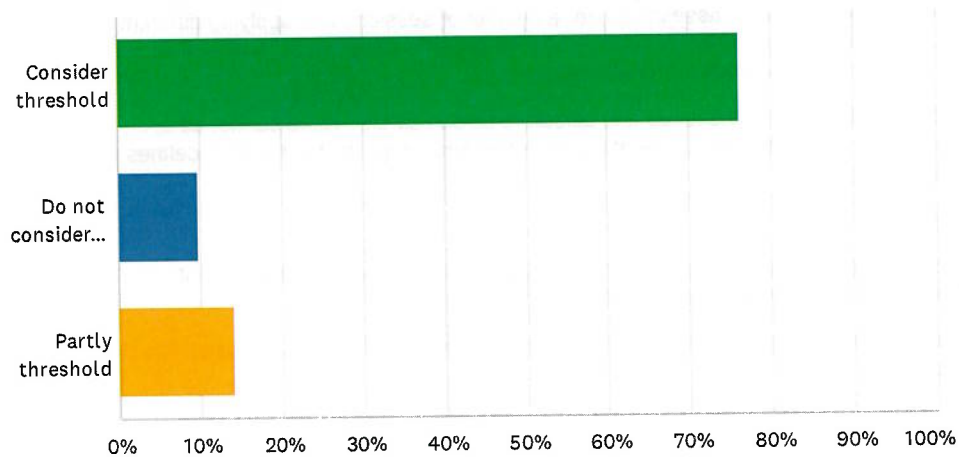
#	RESPONSES	DATE
1	Have the ability to use a chosen theoretical model to assess the suitability and readiness of the service user/users to engage in the therapy being offered and the flexibility to use a different theoretical model if needs be to maintain engagement in therapy.	12/1/2023 3:39 PM
2	Same reason as above - the evidence mostly isn't there.	12/1/2023 2:35 PM
3	You need to know if the client is ready for the work proposed.	12/1/2023 1:19 AM
4	Need more detail in relation to the theoretical models and differing client need and presentation. In a therapeutic context the term service user is inappropriate. Those seeking psychotherapy are generally referred to as clients	11/30/2023 4:54 PM
5	Impractical and restrictive especially if an integrative psychotherapist	11/30/2023 12:43 PM
6	Suggested revision: 'Be able to apply a chosen theoretical model to assess the service users' readiness to engage in the type of therapy offered.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 11:53 AM
7	Firstly, this is restrictive and is not inclusive of the large number of integrative psychotherapists, who frequently integrate psychotherapeutic approaches depending on the needs of the service user. Secondly, It is inadequate that 5.10 simply requires that a model of assessment is chosen. as psychotherapists also need to be able to evaluate whether the model of assessment meets the needs of the service user. Not all models of assessment will be appropriate in all situations. 5.10 could read "Be able to appraise and apply a chosen theoretical model or models to assess the service users ..." The complex nature of assessment in psychotherapy is not captured in 5.10 perhaps due to failing to understand why psychotherapy requires level 9 attributes.	11/29/2023 5:27 PM
8	In general, I consider that the Professional Knowledge and Skills, presented in the Draft Standards of Proficiency for Psychotherapists, cause concern as, even while most are part of the current practice of psychotherapists, some are not at the appropriate level needed (being too low), and a number of highly important competencies are not included.	11/28/2023 8:41 PM
9	i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 9:41 AM
10	This sounds quite mechanical but it would be more a matter of sensing the client from varied angles in order to assess suitability for the type of therapy offered.	11/23/2023 5:23 PM
11	As Psychotherapists we do not assess. On meeting with a client (we do not use the term service user, as we are mostly not part of a service or organisation, but working in isolation, one to one with a client) often on going through the intake (going through limits of confidentiality, informed consent and taking basic details) I would have an idea of which therapeutic tools I will utilise. Psychotherapy is client led, the work is collaborative and is not done through an agenda set by the therapist.	11/22/2023 11:22 PM
12	The threshold is below the existing standards of the current psychotherapist professional bodies. The threshold should be at least Level 9 In addition, the language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:26 PM
13	Suitability assessment of particular type of approach that suits a client could be very rigid and may not always benefit the client. Though setting boundaries and focus is an integral part of therapy it is the relationship between therapist and client that seems to yield better outcomes.	11/22/2023 5:21 PM
14	As above.	11/22/2023 2:34 PM

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15	I think a Masters programme would give a stronger understanding of this and also offers an environment that portises critical analysis and reflection.	11/14/2023 1:02 AM
16	Very limited, very hard to evaluate	11/13/2023 9:39 PM
17	In my experience, the language of 'service user' is avoided in the field of psychotherapy as it tends to diminish the person. I work in a manner - like most of my colleagues - that privileges the person's choice to see me than any decision about 'suitability'. I appreciate that this may be a fitting description of what happens in other fields.	11/1/2023 4:38 PM
18	this standard / statement would need more clarification to determine this to be threshold	10/25/2023 7:56 PM
19	I find this a bit confusing. Is it stating that there must a model at assessment stage? As an integrative therapist I will be assessing over a number of sessions and applying different models depending on presenting need. Is 5.10 a bit superfluous given assessment is alraedy mentioned a few times in the standards?	10/24/2023 9:59 AM
20	The suitability depends on the issue and person to person differs. There cannot be a specific pattern for most or less. The experience and knowledge of the therapist defines the target focused therapy	10/18/2023 5:41 PM
21	as stated in Q5	10/18/2023 11:00 AM
22	Both Counselors and Psychotherapists are currently trained to conduct this type of assessment for the service user. Level 8 is appropriate for both.	10/10/2023 2:31 PM
23	because international research has not set such standards for all known and established approaches	10/3/2023 10:42 AM
24	Being Pluralistic is essential to assist clients	9/25/2023 10:24 AM
25	This is a little ambiguous. Assessing SU for suitability is often done with theoretical models, perhaps a rewording to include use of process	9/22/2023 10:51 AM
26	ditto above	9/13/2023 8:30 PM
27	I believe that client should be able to try a chosen model and decide if it works for them.	9/7/2023 4:56 PM
28	I believe this sounds like a diagnostic, medical model approach to the assessment of a clients presenting difficulties. I don't believe most therapists work by applying just one theoretical model and it isn't rigidly fixed like this. I believe the sentence would read fine without the phrase "theoretical model". I believe standard 5.11 deals with this adequately and covers the varying degrees of the work. It is not possible to narrow it down to the application of one theoretical model. I think you need to ask what you are trying to assess here. Is it to do with assessing presentations and differentiating between mild, moderate and severe presentations and if so then this is not something to do with "theoretical models". I don't believe even a GP would use a theoretical model to understand their patients presenting difficulties.	9/4/2023 9:25 PM
29	Where there theoretical models must be researched	9/4/2023 8:05 PM

Q8 Standard 5.11 Be able to work therapeutically with a wide range of presenting issues of varying degrees of complexity and severity, and across a wide range of diagnoses in order to facilitate service user insight and long term change.

Answered: 184 Skipped: 244



ANSWER CHOICES	RESPONSES	
Consider threshold	76.09%	140
Do not consider threshold	9.78%	18
Partly threshold	14.13%	26
TOTAL		184

Q9 If you do not consider Standard 5.11 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 38 Skipped: 390

#	RESPONSES	DATE
1	This would not apply to psychotherapists who have trained in a specialised form of therapy eg psychoanalytic therapy.	12/1/2023 4:11 PM
2	A suggested change to language may be: Understand the language used within the medical model and social model in order to support engagement in therapy, maintain safe practice and support service users to have good outcomes from therapeutic engagement. Therapists need to be able to work therapeutically with a wide range of presenting issues including people who attend with enduring mental health conditions, and with various degrees of complexity and severity. Systemic Psychotherapists aim to work collaboratively with people to support good outcomes.	12/1/2023 3:39 PM
3	It is good to have a broad education, but people can specialise.	12/1/2023 2:35 PM
4	This is a largely medical mindset. The language of diagnoses means different things to different clients, and has different impacts on them. You need to know the bigger individual and societal context.	12/1/2023 1:19 AM
5	Again the use of service user is inappropriate, The correct term is client. As psychotherapists we also support the client to develop self understanding, self compassions and self autonomy.	11/30/2023 4:54 PM
6	Suggested revision: 'Be able to work therapeutically with a wide range of presenting issues of varying degrees of complexity and severity, including those with enduring mental health conditions, and across a wide range of diagnoses to facilitate service user insight and long-term change.'* Add additional proficiency: 'Understand the language around diagnosis, psychopathology, and mental disorders within both medical model and social model frameworks.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 11:53 AM
7	5.11 is not inclusive of humanistic approaches to psychotherapy as it is focused around problems rather than persons. The focus on persons is one of the features that distinguishes psychotherapy from counselling. 5.11 also privileges a medical model (diagnosis) Psychotherapy necessarily uses a wider range of models of problem and treatment description than is captured in 5.11, A more adequate wording would be "Be able to work therapeutically with a wide range of service users and their presenting issues of varying degrees of complexity and severity in order to facilitate service user insight, healing and long term change"	11/29/2023 5:27 PM
8	There is a gap in addressing the capacity necessary to work with complex clients, and that the proficiencies as currently presented do not adequately describe the knowledge, skills and competence actually required for safe, ethical, and competent practice with vulnerable clients. There are gaps in the detail of providing developmentally appropriate work; utilising advanced clinical judgement informed by specialist knowledge; and working within ambiguous contexts	11/28/2023 8:41 PM
9	Humanistic & Integrative Psychotherapy does not do or work with Diagnoses. Diagnoses belong to the medical model. Psychotherapists are merely informed by such but work with the person and their experience.	11/28/2023 3:30 PM
10	i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 9:41 AM
11	I would look to good practice here (and the evidence base) again the problem of using a broad brush and looking at psychotherapy as an area as opposed to distinct and individual school creates a problem. With the evidenvce base of Cognitive Behavioural Psychotherapy we should look to the 'stepped approach to care' within this we see both 'low	11/24/2023 10:31 AM

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(Psychotherapists)
intensity' and 'high intensity psychotherapists a much safer way to achieve outcomes for patients.

12	It takes years of practice for this goal to be achieved and I would like student to be aware of this long term process to attain it.	11/23/2023 5:23 PM
13	As Psychotherapists we do not diagnose. We do work with a wide variety of presentations. The work is person centered. If a person comes and reveals a diagnosis or if I felt an assessment may be necessary I would suggest a visit to their GP and a referral to the relevant service.	11/22/2023 11:22 PM
14	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:26 PM
15	Current CORU academic recommendations were followed I do believe new graduates would possess the knowledge to safely practice	11/22/2023 5:15 PM
16	Do not ignore the personal experience of therapists working in and with clients from a wide variety of experiences.	11/22/2023 2:34 PM
17	Integrative Psychotherapy alone covers a wide range of content allowing qualified therapists to work with issues such as depression, neurodiversity, anxiety, trauma and some level of ocd, addiction and eating disorders, but severe complex situations of specific diagnosis like multiple personality disorder, schizophrenia and severe eating disorders, require more specified specialised training that cannot be possible covered in detail within the Psychotherapy educational framework.	11/20/2023 3:37 PM
18	This all depends on the level of education including life skills of the Psychotherapist. Level 8 is a basic degree accessed from leaving cert. This is NOT an area for any 21 year to go into after an ordinary degree due to the complexity of the work this is received. I personally believe that there should be a consideration of the entry age to Psychotherapy training min 35 years.	11/16/2023 9:44 PM
19	I think this would place both the client and therapist at risk. I think to manage mild presentations, a degree is all that is required, but for more severe presentations Coru should be demanding a Masters and nothing less.	11/14/2023 1:02 AM
20	Life experience, therapist competence should be more valuable	11/13/2023 9:39 PM
21	Again, the problem here is one of conceptualisation of the work of psychotherapy. As for most of the standards proposed here, the language is alien to me as a psychotherapist.	11/1/2023 4:38 PM
22	there is no guarantee of facilitated long term change, this can only be a (usually achieved) aim	10/25/2023 7:56 PM
23	should be stronger	10/25/2023 2:34 PM
24	I think this should be stronger.	10/25/2023 2:34 PM
25	Language is not strong enough with regard to the complex work that psychotherapists do with clients with mental illness	10/22/2023 11:30 AM
26	To strengthen with regard to clients with enduring mental health conditions. Also to clarify that the psychotherapist must understand the language around diagnosis, psychopathology, mental disorders within a medical model framework but also within a social model framework.	10/21/2023 6:39 PM
27	very general - what is this standard prioritising?	10/20/2023 8:56 PM
28	Refreshing and learning are endless. What we learn in college theoretically can not interpret the sufficiency of the methods and ways of counselling. The knowledge and constant learning are required to make the practitioner able to deal with various clinical issues of the cls. Again degree does not interpret the person's qualification. Being therapists means having communication skills and be able to upside down and turn around to find out the core of the problem. Again the threshold is not important.	10/18/2023 5:41 PM
29	as stated in Q5	10/18/2023 11:00 AM
30	Presenting issues are not always the true source of the clients pain, so lots of work ends up being complex, however psychotherapists are not in a position to diagnose. This point would more effectively support the client and clinician further if it mentioned about clinicians being able to recognise when further support was required perhaps through referral to GP etc. Psychotherapists in general are not trained to diagnose by education training facilities nor do we want to. A person having a "diagnosis" does not explain how the person came to have said diagnosis and this is where therapy can help. The person is not just a diagnosis,	10/6/2023 12:33 PM

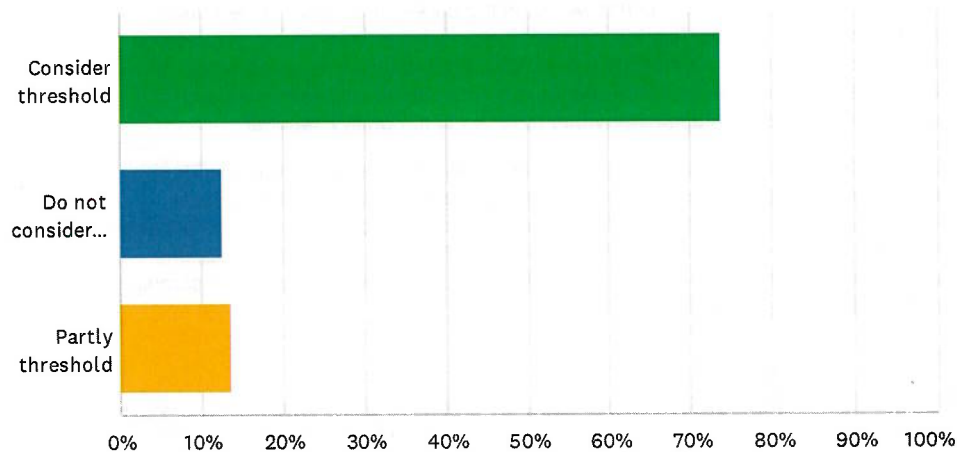
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they are being seen and heard by the therapist. It is not possible "to work across a wide range of diagnosis" without specialist training. For example research shows that dialectical behavioural therapy is the preferred treatment of someone that has been diagnosed with Borderline Personality Disorder (BPD).

31	It is imperative we deliver a service to meet the needs of clients and limit our ability to our own limitations	9/25/2023 10:24 AM
32	While I think its important to be able to work therapeutically with a wide range of presenting issues. I don't think it is possible to hold a high standard of understanding of all diagnoses. Also we can only learn what we are being thought. Who holds the responsibility for defining what these are.	9/22/2023 4:45 PM
33	Some therapeutic techniques work better with specific presenting issues. Practitioners however flexible in their approaches are stronger in some areas than others. Also some theoretical approaches are in contradiction to others. Specialising in specific areas is beneficial to clients. Being aware of limitations as a practitioner and having a good knowledge of other psychotherapists/services to refer clients on is essential.	9/19/2023 9:35 AM
34	I have to take issue with the word diagnoses, that draws on a medical model and many modalities of counselling are founded on different epistemological and philosophical foundation that are not tied to socially constructed and contested diagnostic categories of distress. Could you not remove the word 'diagnoses' and rephrase it as 'presentations' - because it would be more inclusive and reflect the diversity of perspectives and paradigms that assess and address emotional distress.	9/14/2023 1:18 PM
35	ditto above	9/13/2023 8:30 PM
36	We all have limitations.. "severity, complexity across a wide range of diagnosis" is very broad. Its hard enough for people to access therapists availability without making it even longer and harder to become psychotherapists	9/8/2023 2:33 PM
37	I believe that each therapist has a right to refuse to work with certain demographic, in line with their competence.	9/7/2023 4:56 PM
38	As long as your trained in presenting issues	9/4/2023 8:05 PM

Q10 Standard 5.12 Be able to critically appraise current policies applicable to the work of their profession and the role of psychotherapy in the development and implementation of policy on health and social care on a national and international level.

Answered: 168 Skipped: 260



ANSWER CHOICES	RESPONSES	
Consider threshold	73.81%	124
Do not consider threshold	12.50%	21
Partly threshold	13.69%	23
TOTAL		168

Q11 If you do not consider Standard 5.12 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 32 Skipped: 396

#	RESPONSES	DATE
1	This is a political issue and not a criteria for the adequacy of a person's training.	12/1/2023 4:17 PM
2	The first part is important, the second part is optional in my opinion.	12/1/2023 2:37 PM
3	Depending on the role the Psychotherapist is undertaking - whether they are employed in an organisational setting that is impacted directly by policy, this standard could be a threshold or not.	12/1/2023 12:10 PM
4	Critical appraisal of policies may not be an expertise of a person in this profession. Does not mean they are not an excellent Counsellor/Psychotherapist.	11/30/2023 7:52 PM
5	I consider this more advanced knowledge which would require considerable experience - suggest 10 years	11/30/2023 6:37 PM
6	The CORU Draft Standards for Psychotherapy do not reach the EAP (European Association of Psychotherapy) Standards. In order to be able to effectively collaborate with our international colleagues, we need to bring the CORU Standards up to that of our international psychotherapy colleagues and organisations.	11/30/2023 5:01 PM
7	Not necessary knowledge for entry	11/28/2023 3:30 PM
8	Language not in keeping with psychotherapy training	11/28/2023 7:59 AM
9	for the following reasons. i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 9:46 AM
10	I would indicate that this should be specific to the psychotherapists level of competence within their psychotherapeutic profession.	11/24/2023 10:36 AM
11	While important to be aware of and able to appraise current policies, it is often with experience we understand meaning at a national and international level	11/23/2023 7:46 PM
12	Unless a therapist is volunteering as part of a particular organisation it would not be relevant to our work to develop or implement policy - the majority of Psychotherapists work in isolation.	11/22/2023 11:29 PM
13	I'm not sure if everyone who meets just the minimum Threshold would meet this standard.	11/14/2023 1:09 AM
14	While it is important to be aware and up-to-date on international policies, the role of the psychotherapist is to work with humans. Overcomplicating the theoretical aspect of this work, such as policy-specific knowledge requirements, takes away from the focus this work has: working with humans.	11/3/2023 1:39 PM
15	This seems like a strange inclusion here and not in keeping with the culture of psychotherapeutic practice in the main.	11/1/2023 4:43 PM
16	We believe that this standard reflects a higher level of academic, knowledge and skill competency that more reflects the national framework of qualifications at level 9 or beyond.	10/26/2023 8:04 PM
17	feels like a 'step too far'. Some people will have an interest in larger policy in health and social care but many will not.	10/24/2023 10:01 AM
18	two different standards merged here - 1-appraising policy I think is relevant 2- identifying role of profession in implementing healthcare policy is function of professional body rather than individual practitioners	10/20/2023 9:00 PM
19	The previous recognition of all levels can suffice as it was by IACP. The cpd and training types requirements after accreditations are more important. The clutter of stagnation of the therapists happen after they have their degree and accreditations. If instead of emphasis and insistence on threshold the standard and benchmark are on certain criteria for trainings	10/18/2023 6:07 PM

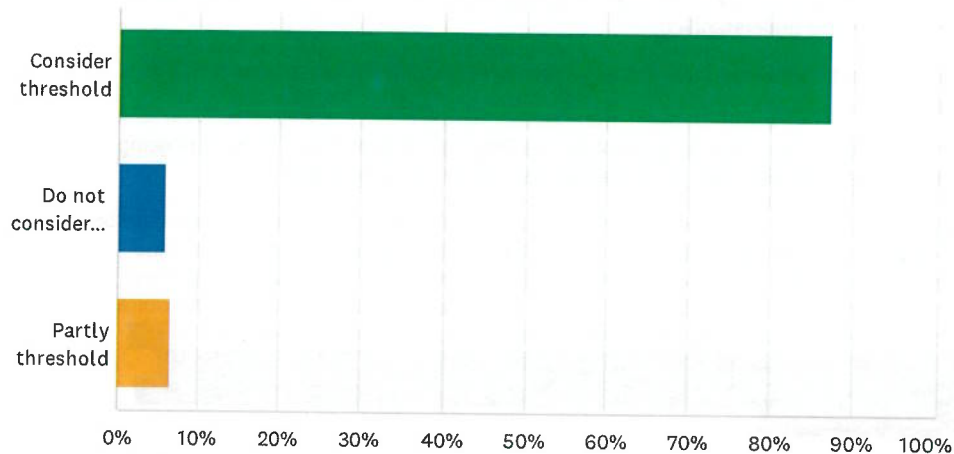
Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

and cpd after having the degree and full accreditations (Psychotherapists), it certainly qualifies and boosts the skill of Counsellor and therapists much better.

20	not related directly related to evidence based variables that impact client outcomes - working alliance, goal consensus/collaboration - more an area linked to level 9 postgraduate interests	10/11/2023 7:47 PM
21	This could be re-worded, it is unclear and seems to go beyond the scope of practice of a psychotherapist	10/5/2023 4:48 PM
22	To create an environment of clear direction, consultation and understanding, also allows for better feedback and development to encourage progression	9/25/2023 10:29 AM
23	What is the level of continuous feedback coming from counsellors or psychotherapists themselves. Is there a wide range of representation making the final decisions.	9/22/2023 4:50 PM
24	The second part, the role of psychotherapy in the development and implementation of policy in health and social care on a national and international level. I do see the significance and value of psychotherapists clinical experience in the development of such policies; however, this should not necessarily be tasked to individual psychotherapists, or considered as criteria for registration. This is more appropriate for working groups, and in the interests of equity, is it a criteria requirement reflected across other already CORU regulated professions?	9/14/2023 7:53 AM
25	higher standard to recognise the value of our profession	9/13/2023 8:30 PM
26	Not all psychotherapists who are effective in the practical application of their role are proficient at the development and analysis of policy. To abide by and have an understanding of the implementation of policy would indeed be an essential skill but not necessary in being able to write or produce it.	9/10/2023 12:24 PM
27	Time constraints could be an issue here	9/8/2023 2:34 PM
28	While this is important, I believe that not every practitioner needs to be able to critically appraise at any given moment. Every one of them should have an opportunity to.	9/7/2023 4:58 PM
29	Because I am not sure this is score skill	9/7/2023 12:21 PM
30	Policy development is not necessarily a skill set that all psychotherapists will need in their work.	9/6/2023 6:21 PM
31	Policy analysis might be best done through accreditation body CPD hours, rather than linking it directly to standards of therapy	9/5/2023 4:57 PM
32	depending on resources	9/5/2023 3:37 PM

Q12 Standard 5.13 Be able to reflect on the impact of the service user's experience, be able to demonstrate an understanding of their feelings and emotions and communicate that understanding in a non-judgemental manner.

Answered: 167 Skipped: 261



ANSWER CHOICES	RESPONSES	
Consider threshold	87.43%	146
Do not consider threshold	5.99%	10
Partly threshold	6.59%	11
TOTAL		167

Q13 If you do not consider Standard 5.13 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 17 Skipped: 411

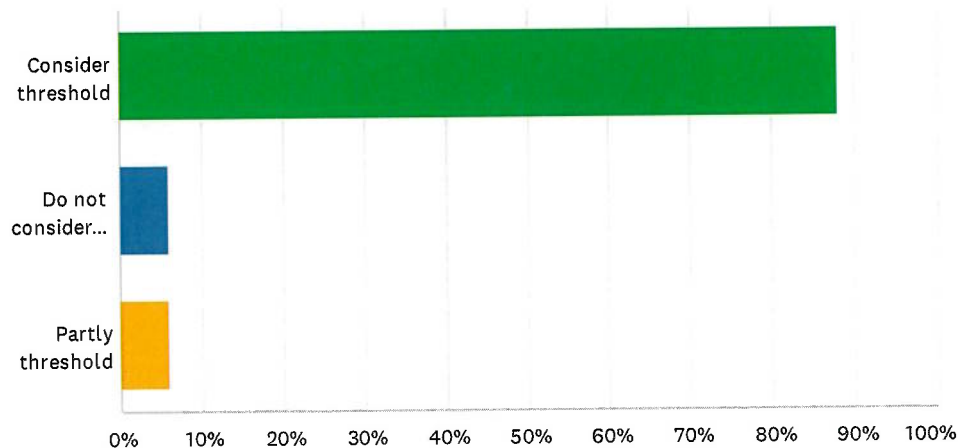
#	RESPONSES	DATE
1	Have the ability to reflect on the service users experience in a non-judgmental way Be able to communicate that understanding	12/1/2023 3:47 PM
2	You also need to be attuned to the meaning-making of the client and the impact all this is having on them.	12/1/2023 1:22 AM
3	In order to be able to work non judgementally the Psychotherapist needs to be in ongoing psychotherapy supervision with an accredited psychotherapy supervisor	11/30/2023 5:01 PM
4	Suggested revision: 'Be able to reflect on the impact of the service user's experience, to be able to relate in a meaningful manner to what a client is saying, and how they are in the work, and communicate understanding in a non-judgemental manner.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession. [REDACTED]	11/30/2023 11:55 AM
5	This is significantly below the safe threshold for the practice of psychotherapy and omits the therapeutic relationship and how it is impacted by the service-users interpersonal life experience and/or complex trauma. Largescale outcome research clearly indicates the pivotal role of the therapeutic relationship and the complexity of that relationship. Over the past century a very robust body of theory, research and practice has shown that the therapists own psychological processes and interpersonal life history has a strong impact on the psychotherapy process and, if out of the psychotherapist's awareness, can make therapy unsafe for the service user. 5.13 would need to read "Be able to to reflect-in-action on the impact of the service-user's experience, be able to empathically demonstrate an understanding of their feelings, emotions, thoughts and patterns, communicate that understanding in an effective and non-judgemental way and understand the positive and negative impact that the therapist's own life experiences and psychological processes can have on their capacity to understand and help the service user"	11/29/2023 5:27 PM
6	i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. Personal therapy needs to be mandatory to allow therapists to distinguish between their own history & that of their client. iii) An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 9:46 AM
7	From a cognitive behavioural psychotherapy perspective I feel professionally this should also include the requirement of the use of regular supervision to assist in the understanding of the service users experience.	11/24/2023 10:36 AM
8	We work with members of the public who contact us independently of any service and as such are identified by Psychotherapists as clients, not as service users. We do work in a non-judgemental way and demonstrate an understanding of feelings and emotions of clients.	11/22/2023 11:29 PM
9	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:27 PM
10	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:17 PM
11	This seems overly simplistic. It might also require a number of separate standards as each component is an element in itself.	11/1/2023 4:43 PM
12	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:04 PM
13	in a relational and empathic manner.....	10/20/2023 9:00 PM
14	The empathetic feeling and being congruent with clients have nothing to do with levels of degrees.the sane structures we all learned and we are using them in practice.	10/18/2023 6:07 PM

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15	as stated in Q5	10/18/2023 11:00 AM
16	This is the basis of any half descent therapy.	9/25/2023 10:29 AM
17	ditto above	9/13/2023 8:30 PM

Q14 Standard 5.14 Be able to review the therapeutic process and progress with the service user, and make adjustments in collaboration with the service user.

Answered: 169 Skipped: 259



ANSWER CHOICES	RESPONSES	
Consider threshold	88.17%	149
Do not consider threshold	5.92%	10
Partly threshold	5.92%	10
TOTAL		169

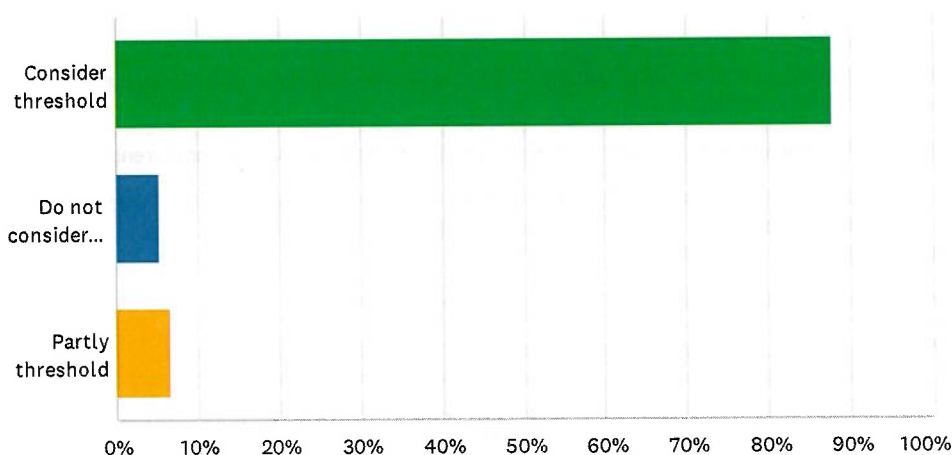
Q15 If you do not consider Standard 5.14 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 18 Skipped: 410

#	RESPONSES	DATE
1	The therapist should have the ability to review the progress of therapy with the service user and make adjustments in collaboration with the service user, in accordance with the specific modality the therapist is trained in	12/1/2023 3:47 PM
2	You can only make adjustments according to the modality /modalities you are competent in.	12/1/2023 1:22 AM
3	In order to be able to work collaboratively with the client, the Psychotherapist needs to be in ongoing psychotherapy supervision with an accredited psychotherapy supervisor. This needs to be reflected in this standard	11/30/2023 5:01 PM
4	Depends on type of psychotherapy, e.g. relational or intervention	11/30/2023 12:28 PM
5	Suggested revision: 'Be able to review the therapeutic process and progress with the service user, and make adjustments in collaboration with the service user in accordance with the specific nature of the modality in which the psychotherapist practises.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 11:55 AM
6	i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. The level of training, skills, experience of the Clinical Supervisor is critical to supporting the therapist who has achieved & completed i) & ii) above	11/26/2023 9:46 AM
7	From a cognitive behavioural psychotherapy perspective I feel professionally this should also include the requirement of the use of regular supervision to assist in the understanding of the service users experience.	11/24/2023 10:36 AM
8	I would not use the description 'service user' but client. People access Psychotherapy in isolation and the therapy is carried out in isolation, not as part of a service or organisation, for the most part.	11/22/2023 11:29 PM
9	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:27 PM
10	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:17 PM
11	I think this way of working requires a therapist whose very secure in themselves and in their training and experience. I think this take time and a four year degree will not provide sufficient time for this personal & professional development which is a requisite of a true collaborative client/therapist relationship.	11/14/2023 1:09 AM
12	While this may fit with some counselling/intervention approaches, it does not fit a longer term psychotherapeutic approach. While there is always attention to the process of our work, this is conducted in a more organic manner.	11/1/2023 4:43 PM
13	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:04 PM
14	again this is an aim not a guarantee, not always possible depending on the presentation of the service user	10/25/2023 8:00 PM
15	It needs the notes and documentation to review and has nothing to do with threshold	10/18/2023 6:07 PM
16	as stated in Q5	10/18/2023 11:00 AM
17	Without this, the process becomes about directing and fixing end users	9/25/2023 10:29 AM
18	ditto above coment	9/13/2023 8:30 PM

Q16 Standard 5.15 Be able to identify and critically evaluate how psychosocial factors may affect both the service user and the therapeutic process, and manage these in the therapeutic relationship.

Answered: 166 Skipped: 262



ANSWER CHOICES	RESPONSES	
Consider threshold	87.95%	146
Do not consider threshold	5.42%	9
Partly threshold	6.63%	11
TOTAL		166

Q17 If you do not consider Standard 5.15 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 20 Skipped: 408

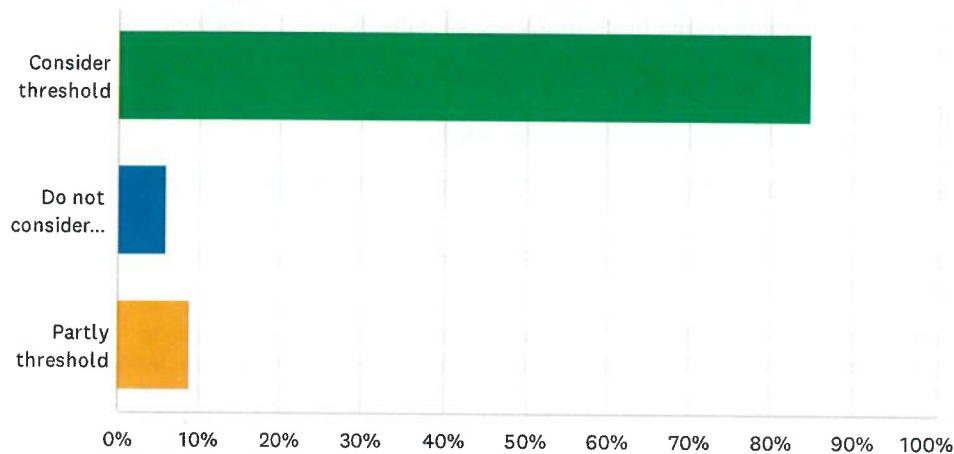
#	RESPONSES	DATE
1	Have the ability to encompass how psychosocial factors and contextual factors impact on the ability to engage in therapy and how these factors may be affecting or have affected the service user, the therapist and the therapeutic relationship.	12/1/2023 3:59 PM
2	You need to know how you, as the therapist, are also impacted.	12/1/2023 1:26 AM
3	It is not about managing the therapeutic relationship. Core and essential to the therapeutic process is that the Psychotherapist works within relationship. This is very different to managing the relationship	11/30/2023 9:47 PM
4	Affect on the process could include affecting the psychotherapist (e.g. countertransference)	11/30/2023 12:29 PM
5	Suggested revision: 'Be able to identify and critically evaluate how psychosocial factors may affect the service user, the psychotherapist and the therapeutic process, and manage these in the therapeutic relationship.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:09 PM
6	5.15 The therapist's own psychosocial reality and positionality is also impactful on the therapeutic process and failure to be aware of this can be detrimental to the therapy. 5.15 could read " Be able to identify and critically evaluate how psychosocial factors may affect both the service user and the therapeutic process and, with awareness of the influence of their own psychosocial positionality, manage these in the therapeutic relationship"	11/29/2023 5:27 PM
7	It is critical that the therapist is aware and able to evaluate what is happening from a psychosocial point of view in order to help the client with the issues they are bringing to therapy.	11/29/2023 1:10 PM
8	All of the following are critical to achieving 5.15 & must be embedded through out the training, & experience of the therapist i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 9:50 AM
9	Psychotherapists identify the people they work with as clients, not service users. Mainly, a therapist is not part of an organisation, but working in isolation. If the client brings issues which demonstrate psychosocial factors that effect them and the process, this would be brought into the therapy. It would not be evaluated for.	11/22/2023 11:32 PM
10	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:28 PM
11	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:18 PM
12	I'm not sure a degree programme would facilitate this kind of insight & reflection from most of their degree students. I think if the students had completed other Psychotherapy/psychology courses before, so they had somewhat of a foundation before commencing the degree this might be possible, but otherwise, I'd have to say no to achieving Standard 5.15	11/14/2023 1:16 AM
13	relating to above points.	11/1/2023 4:46 PM
14	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:05 PM
15	A tall order at the best of times! Complex	10/24/2023 3:02 PM
16	Psychosocial factors knowledge depends on financial and culture and environmental that embraces the identification of the causal and elucidation of all kinds of issues as triggers	10/18/2023 6:20 PM

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17	as stated in Q5	10/18/2023 11:03 AM
18	Again a little unclear with regard to psychosocial, being more specific would help	10/5/2023 4:55 PM
19	This is Basic training and required to facilitate a relationship	9/25/2023 10:32 AM
20	standard to low not recognising the value of our profession	9/13/2023 8:30 PM

Q18 Standard 5.16 Be able to critically appraise the theories of therapeutic relationships and be able to establish, build, maintain and conclude a long term therapeutic relationship in a safe and ethical manner.

Answered: 166 Skipped: 262



ANSWER CHOICES	RESPONSES	
Consider threshold	84.94%	141
Do not consider threshold	6.02%	10
Partly threshold	9.04%	15
TOTAL		166

Q19 If you do not consider Standard 5.16 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 23 Skipped: 405

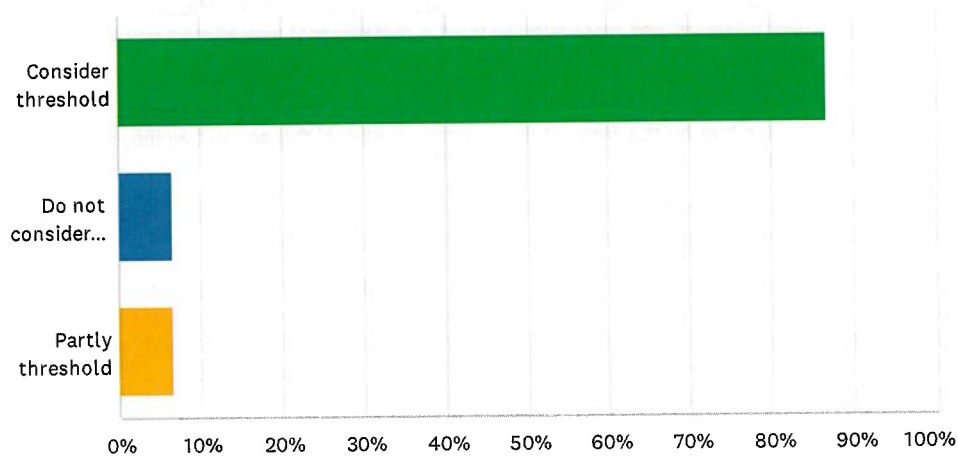
#	RESPONSES	DATE
1	A Psychotherapist needs to be able to critically appraise the theories of therapeutic relationships and to be able to build maintain and negotiate the ending of a long term therapeutic relationship in a safe and ethical way. This should also include instances when service users have had negative experiences . Therapists also need to be able to demonstrate the ability to repair ruptures in therapeutic relationships . Relationship building and maintenance ,is a key element for therapeutic alliance .	12/1/2023 3:59 PM
2	Building trust, managing endings, managing ruptures and repairing consequent wounds is key.	12/1/2023 1:26 AM
3	Supervision is critical to reflecting on how as a Psychotherapist I am working within relationship with my client.	11/30/2023 9:47 PM
4	Suggested revisions – to make this into 2 proficiencies and add content: 1. 'Be able to critically appraise the theories of therapeutic relationships.' 2. 'Be able to establish, build, maintain and negotiate ending a long-term therapeutic relationship in a safe and ethical manner, including instances where the client has had negative experiences, including of endings or transitions, in the past, and demonstrate the capacity to repair ruptures or difficulties in the therapeutic relationship, including difficulties that stem from unconscious processes.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:09 PM
5	It is critical that the therapist is aware and able to evaluate what is happening from a theoretical point of view in order to help the client with the issues they are bringing to therapy.	11/29/2023 1:10 PM
6	For 5.16 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:50 AM
7	Cognitive Behavioural Psychotherapy can be both a long term and short term approach i would remove the words 'long term' here and indicate 'build, maintain and conclude a therapeutic relationship' This ensure the wrong message is not encoded and allows for relationships of varying lengths.	11/24/2023 10:39 AM
8	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:18 PM
9	This should read "a range of theories of therapeutic relationships" to clearly indicate that the standard relates to some but not all theories in this category.	11/22/2023 10:16 AM
10	I'm not sure a degree programme would facilitate this kind of insight & reflection from most of their degree students. I think if the students had completed other Psychotherapy/psychology courses before, so they had somewhat of a foundation before commencing the degree this might be possible, but otherwise, I'd have to say no to achieving Standard 5.15	11/14/2023 1:16 AM
11	many different elements here, which need to be disaggregated.	11/1/2023 4:46 PM
12	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:05 PM
13	again this is an aim, it is not a guaranteed outcome to be able to maintain a long term therapeutic relationship.	10/25/2023 8:06 PM
14	this threshold is not sufficiently considering complexities including client work presenting complex therapeutic relationships, transference and counter transference issues, projective	10/25/2023 2:40 PM

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	identification issues etc.	
15	I think this one needs to include more complexity and detail further the depth and complexity with therapeutic relationships e.g. issues of transference and countertransference	10/25/2023 2:40 PM
16	To add, including instances where the client has had negative experiences, e.g. of endings or transitions, in the past. Also to add the capacity to therapeutically work to repair ruptures or difficulties in the therapeutic relationship, including those that stem from unconscious processes.	10/21/2023 6:39 PM
17	Person center therapy and all general related competencies relevant to the modifications of type of therapy acquires interests and motivation to build a professional relatedness within therapy session.	10/18/2023 6:20 PM
18	as stated in Q5. Also I don't believe psychotherapy can be provided in a safe and ethical manner if the therapist has had no requirement to undertake personal therapy in training, like the drafted criteria proposes.	10/18/2023 11:03 AM
19	not just therapeutic relationship with as described by carl rogers but idea of working alliance as demonstrated in many replicated meta analysis since smith & glass 1977	10/11/2023 7:47 PM
20	This could do with adding "resolving therapeutic alliance ruptures" as per the evidence-base (meta-analysis) on rupture repair. I have also just conducted the largest therapeutic alliance study to date highlighting the importance of ruptures in the alliance and the implication for repair strategies on outcome (see) Mahon D, Brown, J, Miniarni, T (in press). The psychometric properties and treatment outcomes associated with two measures of the adult therapeutic alliance using naturalistic data	10/5/2023 4:55 PM
21	Essential to create a relationship of trust and build a safe space.	9/25/2023 10:32 AM
22	ditto above	9/13/2023 8:30 PM
23	There are lots of theories, which ones specifically?	9/8/2023 2:35 PM

Q20 Standard 5.17 Be able to use psychotherapeutic skills to build therapeutic relationships including the ability to demonstrate active listening skills.

Answered: 167 Skipped: 261



ANSWER CHOICES	RESPONSES	
Consider threshold	86.83%	145
Do not consider threshold	6.59%	11
Partly threshold	6.59%	11
TOTAL		167

Q21 If you do not consider Standard 5.17 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 20 Skipped: 408

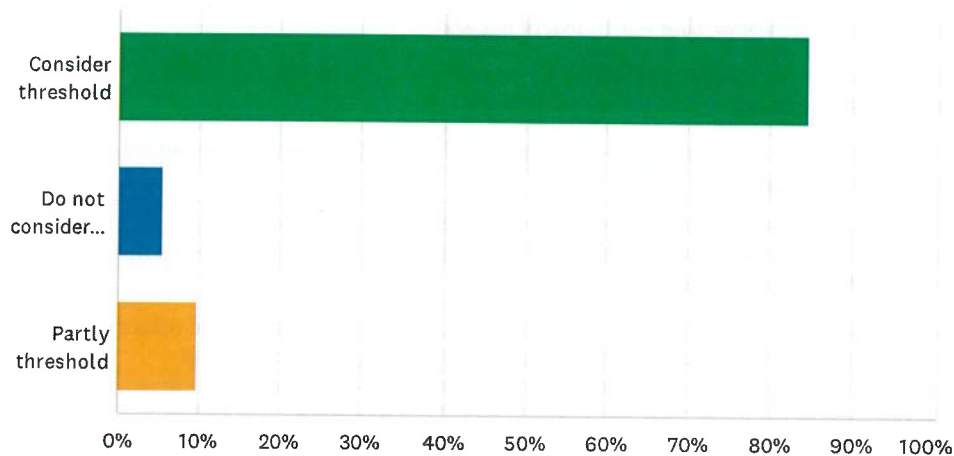
#	RESPONSES	DATE
1	Be able to use specific psychotherapy skills to support the development of therapeutic relationship, including the capacity to listen attentively and to respond appropriately as required to the needs to service users to assist with engagement in psychotherapeutic processes	12/1/2023 3:59 PM
2	You need to notice and work with the conscious and unconscious content, and respond according to changes that occur in the relationship/sessions.	12/1/2023 1:26 AM
3	Supervision and experiential self work is essential to sustaining the ability to listen deeply to the client	11/30/2023 9:47 PM
4	Psychotherapeutic relationships are much more than demonstrating active listening; could demonstrate this to the satisfaction of an observer and not at all understand the emotional complexities.	11/30/2023 12:29 PM
5	Suggested revision: 'Be able to use modality-specific psychotherapeutic skills/practices to support the development of therapeutic relationships, including a capacity to listen attentively, both to conscious and unconscious communications, noticing and responding to emotional shifts occurring within the therapy session, with the aim of maintaining an appropriate level of emotional engagement.' *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:09 PM
6	5.17 falls far short of the needs of safe psychotherapy practice with complex clients and their typical presenting issues. It would need to read "Be able to use and adapt psychotherapy skills to build and maintain therapeutic relationships, including at the reparative and developmentally-needed levels, and with service-users who have complex and/or traumatic relational experiences. Reference to active listening skills is sub-threshold for safe psychotherapy practice.	11/29/2023 5:27 PM
7	Active listening skills is one of the main tools in therapeutic tool box, the only way to engage this tool is to know about it and be thought it in a theoretical environment	11/29/2023 1:10 PM
8	For 5.16 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:50 AM
9	Building a therapeutic relationship involves a lot more than active listening. It involves the ability for therapeutic presence and being able to tolerate intense emotional expression from clients. It involves a in-depth knowledge of unconscious processes that can impact the therapeutic relationship. It involves knowledge of attachment theory in order to inform the psychotherapist of how client's engage and connect with others.	11/22/2023 6:28 PM
10	the problem here is the 'demonstration of active listening skills', which may fit for some CBT approaches but not for others. While our work involves active listening, this is something developed and the quality of our listening depends on the nature of the relationship, our client's requirement for this, the stage in the relationship, etc.	11/1/2023 4:46 PM
11	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:05 PM
12	needs further consideration of therapeutic use of self. Embodied listening and responding. Trauma is held in the body and required an attuned embodied listening.	10/25/2023 2:40 PM
13	This requires much more detail, active listening is very narrow, building therapeutic relationship requires far more. Therapeutic use of self is essential in psychotherapy, this needs to be teased out much further.	10/25/2023 2:40 PM

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14	Does not cover the associated need to be aware of, and respond to, emotional shifts occurring within the therapy session with the aim of maintaining an appropriate level of emotional engagement.	10/21/2023 6:39 PM
15	mentioning listening skills detracts from range of skills required	10/20/2023 9:01 PM
16	Active listening shows the alertness and engagement of the therapist and holding on threshold here seems irrelevant.	10/18/2023 6:20 PM
17	as stated in Q5	10/18/2023 11:03 AM
18	Yes, but would be helpful to suggest what skills help build the alliance, there are many	10/5/2023 4:55 PM
19	Skills should be easily managed and employed in accordance with the clients needs. Be therapeutic of at least integrative	9/25/2023 10:32 AM
20	ditto above	9/13/2023 8:30 PM

Q22 Standard 5.18 Be able to contract and re-contract with the service user during the therapeutic relationship, ensuring the therapeutic goals and each person's expectations and responsibilities are clear to all parties involved.

Answered: 163 Skipped: 265



ANSWER CHOICES	RESPONSES	
Consider threshold	84.66%	138
Do not consider threshold	5.52%	9
Partly threshold	9.82%	16
TOTAL		163

Q23 If you do not consider Standard 5.18 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 21 Skipped: 407

#	RESPONSES	DATE
1	In addition to above, have the ability to recognize that there are aspects of therapeutic relationships that may change over the course of the work.	12/1/2023 4:05 PM
2	You must stay within the modality/modalities you're trained in, and be clear on where responsibilities lie so as not to disempower or disenfranchise the client.	12/1/2023 1:30 AM
3	Timing is essential here, at certain periods in therapy if the client is regressed, would not be a time to discuss more practical goals	11/30/2023 12:39 PM
4	Demonstrates a misunderstanding of the unknowns which arise as the therapeutic relationship develops. More complex than being able to state/restate goals. More relevant to interventionist (CBT) approaches only.	11/30/2023 12:29 PM
5	Suggested revision: 'Be able to contract and re-contract, according to the specific nature of the modality, with the service user during the therapeutic relationship, ensuring the therapeutic goals and each person's expectations and responsibilities are clear to all parties involved, while recognising that there are also aspects of the therapeutic relationship and the course of the work that are not fully conscious and develop over the course of the work.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:11 PM
6	The contract with the client is fundamental to good therapy taking place.	11/29/2023 1:14 PM
7	...in a formal or informal and an integrated manner.	11/28/2023 3:43 PM
8	To fulfil 5.18 The following are required For 5.16 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:55 AM
9	Depending on the clients capacity to engage in critical thinking	11/24/2023 1:08 PM
10	Psychotherapy is very much client led. There is therapeutic collaboration, however it is never the therapists goals or expectations that lead. The therapist is responsible for ensuring that there the therapeutic alliance is being achieved and if it is not, it is their responsibility to refer on where work on this is not successful. In Psychotherapy the person worked with is identified as the client, not the service user, as in the majority of cases they arrive at the Psychotherapists door independent of an organisation or service, so the description 'service user' is not fully accurate.	11/22/2023 11:41 PM
11	Whilst contracting is an important aspect of the work. What clients are looking for in therapy is not always quantifiable e.g. they may simply want space to talk about their experiences rather than looking for someone to fix or solve how they are feeling. In addition, the language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:29 PM
12	This is relevant to CBT type interventions and not to psychotherapy.	11/1/2023 4:48 PM
13	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:06 PM
14	needs further detail regarding working with children and developmentally appropriate working.	10/25/2023 2:43 PM
15	Add regardless of age and stage of development here as developmentally appropriate practice is essential.	10/25/2023 2:43 PM
16	Contract is important ,though I have known clients for whom it is frightening and too much. I	10/24/2023 3:16 PM

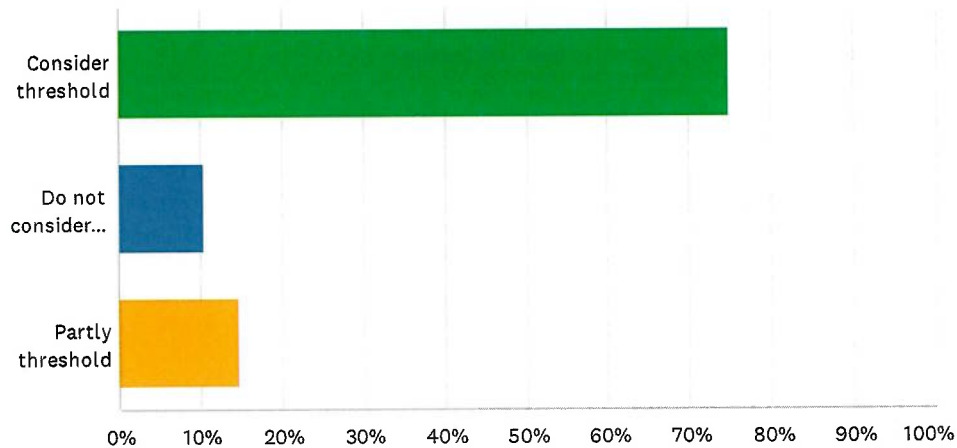
Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

(Psychotherapists)
have reviewed and reset the frame for the work but never recontracted

17	Need 'in a developmentally appropriate manner' added.	10/21/2023 6:39 PM
18	wording is clinical again not reflecting prevalent theoretical models in ireland -	10/20/2023 9:05 PM
19	as stated in Q5	10/18/2023 11:04 AM
20	Clients need to be aware of the boundaries and limitations that each member works with in regard,]less of the number of sessions or the amount of times they return between sessions.	9/25/2023 10:37 AM
21	setting lower standards than European countries and putting public at risk	9/13/2023 8:30 PM

Q24 Standard 5.19 Be able to write concise, accurate and relevant reports which articulate and justify professional decisions made.

Answered: 163 Skipped: 265



ANSWER CHOICES		RESPONSES	
Consider threshold		74.85%	122
Do not consider threshold		10.43%	17
Partly threshold		14.72%	24
TOTAL			163

Q25 If you do not consider Standard 5.19 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 35 Skipped: 393

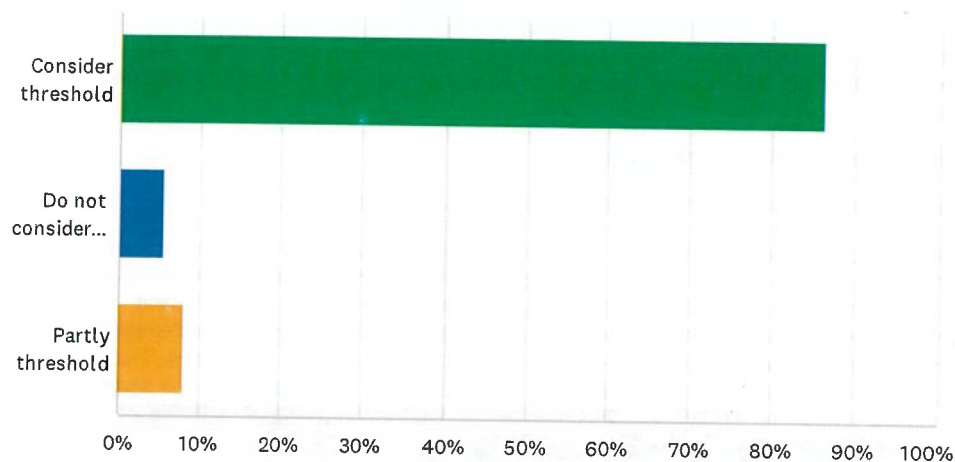
#	RESPONSES	DATE
1	Be able to accurately communicate relevant details regarding the clients therapeutic progress and process and have the ability to write clear concise notes and records that can articulate decision's made	12/1/2023 4:05 PM
2	Only required if requested by Law / Solicitor or other professional bodies	12/1/2023 2:55 PM
3	Skills in note-taking are essential and need to be thorough, particularly around the therapy process/relationship as well as any professional/clinical decisions that are made.	12/1/2023 1:30 AM
4	Concise, accurate and relevant notes yes but not necessarily a report.	11/30/2023 7:54 PM
5	Reflects medical/interventionist/diagnostic language, just as important is reporting on the relationship dynamics, transference/countertransference, points of stuckness, the emerging (and yet to emerge) issues of the client	11/30/2023 12:29 PM
6	Suggested revision: 'Be able to accurately communicate relevant details regarding the client's therapeutic progress/process according to the specific modality and client group, and write concise, accurate and relevant notes/records which articulate and justify professional decisions made.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:11 PM
7	Most therapist's would probably need training in the area of writing reports	11/29/2023 5:29 PM
8	This is not well aligned with humanistic approaches in report writing, where the skill of collaborative input from the service user is regarded as core.	11/29/2023 5:27 PM
9	Very important to protect the client and the therapist	11/29/2023 1:14 PM
10	...to have the basics of and develop...	11/28/2023 3:43 PM
11	To instill confidence in completing professional reports that reflect the difficulties of members of the public who attend therapy therapists must For 5.16 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:55 AM
12	This is important however should we not see here the ability to keep accurate notes, record keeping etc as well?	11/24/2023 10:44 AM
13	Confidentiality precludes Report writing unless it's a child protection issue.	11/23/2023 4:43 PM
14	We do not write reports. We do keep notes - which are concise, and relevant.	11/22/2023 11:41 PM
15	Frequently not relevant	11/22/2023 7:30 PM
16	Unlike pscyhologists, psychotherapist are not currently qualified to make reports. Yes they do need to ensure the write client notes and if there is an ethical decision to be made, that they record their decision making process, However, not all therapeutic interventions are quantifiable. Therapy is centred around how the client present him/herself during the session and this can be varied from session to session so it necessitates using a variety of different decisions moment to moment. This standard will inhibit the free flow of therapy which is fundametal and vital to the therapeutic relationship and therapeutic processes	11/22/2023 6:29 PM
17	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:19 PM
18	I don't believe therapeutic reports should be the subject of analysis or used to justify any approaches used in the work. I believe therapists notes are for their own sole use in tracking and adapting the correct approaches to their work with their clients.	11/22/2023 4:22 PM

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19	I'm not sure a degree programme would facilitate this kind of insight & reflection from most of their degree students. I think if the students had completed other Psychotherapy/psychology courses before, so they had somewhat of a foundation before commencing the degree this might be possible, but otherwise, I'd have to say no to achieving Standard 5.15	11/14/2023 1:21 AM
20	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:06 PM
21	reports need consideration of the therapeutic journey, the process.	10/25/2023 2:43 PM
22	This standard does not reference the therapeutic process itself, reports are not solely about articulating and justifying professional decisions.	10/25/2023 2:43 PM
23	Sure it makes sense from a precautionary stance but none of the many brilliant therapists I attended did this. A stance of preparedness for justification may be legally judicious and diminish risk but it also diminishes the ground of trust and bureaucratises the work. We have seen the damage to teacher pupil relations at third level with the insistence on recording the minutiae of interactions.	10/24/2023 3:16 PM
24	In addition to justifying professional decision made, reports need to consider the future direction of therapy, progress made, and communicate an understanding of the process.	10/22/2023 11:33 AM
25	This needs amendments to reflect the need to be able to accurately communicate relevant details regarding the clients therapeutic progress.	10/21/2023 6:39 PM
26	Any reports are breaking confidentiality	10/21/2023 5:35 PM
27	The use of supervision can and should be used when writing reports	10/18/2023 4:52 PM
28	as stated in Q5	10/18/2023 11:04 AM
29	Reports should only be for courts if required by law.	10/12/2023 9:17 PM
30	We do not supply or write reports in our profession.	10/10/2023 2:34 PM
31	Clarity, decisive and relevant reports can be helpful	9/25/2023 10:37 AM
32	ditto above	9/13/2023 8:30 PM
33	The nature of the work is so personalised and differs from client to client - it is like our finger prints - everyone deserves unique care	9/9/2023 1:42 PM
34	I believe that in a company setting there should be a person that would help a therapist to write such report. And I do believe it will come with practice.	9/7/2023 5:00 PM
35	I think report writing borders on medical expertise and insight. I don't believe that report writing is or should be a part of a therapists role. This means making judgements and is in reality a personal diagnosis or judgement of a person. This is contrary to the basic principle of non-judgement. I believe this should be in relation to notes and not to reports.	9/4/2023 9:37 PM

Q26 Standard 5.20 Be able to reflect on and critically analyse the factors that influence therapeutic boundaries and the dynamics of the therapeutic relationship between the psychotherapist and service user.

Answered: 162 Skipped: 266



ANSWER CHOICES	RESPONSES	
Consider threshold	86.42%	140
Do not consider threshold	5.56%	9
Partly threshold	8.02%	13
TOTAL		162

Q27 If you do not consider Standard 5.20 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 20 Skipped: 408

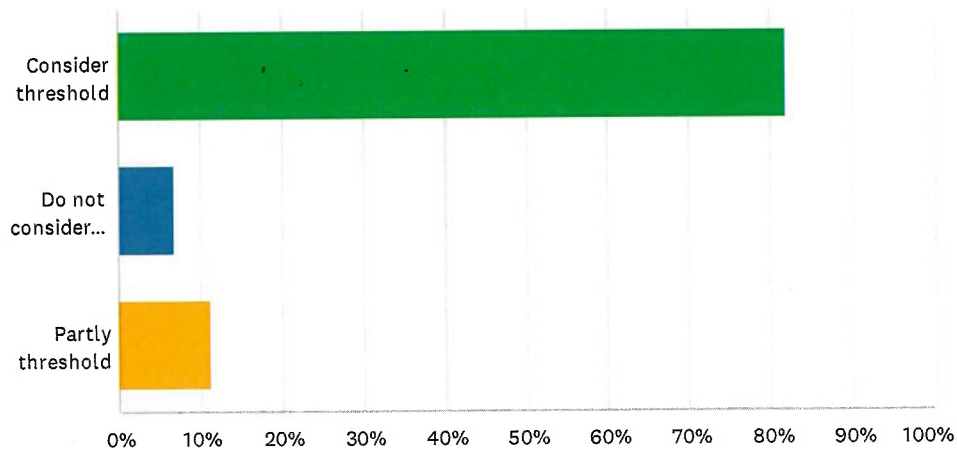
#	RESPONSES	DATE
1	Therapists should have the ability to reflect on and critically analyze the dynamics of the therapeutic relationship and develop appropriate boundaries between the services user and the therapist.	12/1/2023 4:05 PM
2	Client is more appropriate than service user	11/30/2023 9:49 PM
3	The relationship dynamics are influenced by much more than boundaries	11/30/2023 12:29 PM
4	Suggested revisions – to make this into 2 proficiencies for clarity: 1. 'Be able to reflect on and critically analyse the factors that influence the development/observance of therapeutic boundaries between the psychotherapist and service user.' 2. 'Be able to reflect on and critically analyse the dynamics of the therapeutic relationship between the psychotherapist and service user.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:11 PM
5	Perhaps this may be a supervisor to analyse	11/29/2023 5:29 PM
6	this is only an acceptable threshold in combination with 5.22	11/29/2023 5:27 PM
7	Boundaries are a fundamental requirement in therapy, no boundaries no therapy	11/29/2023 1:14 PM
8	Psychotherapist's own personal therapy and Supervision are vital to helping them define therapeutic boundaries and explore the therapeutic r/ship with their clients	11/28/2023 8:41 PM
9	For 5.20 to be achieved the following is required . In particular iv) GDPR compliance is of particular relevance. I insure the confidence i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:55 AM
10	This is concerning as 5.20 'looks' as though this is only in the hands of the Cognitive Behavioural Psychotherapist, it is essential whenever we are referring to factors which impact the relationship that the Cognitive Behavioural Psychotherapist discuss this in supervision. It is the supervision process which keeps the psychotherapist on model and facilitates the reflective and understanding process. The psychotherapist needs to be reflective but supervision is vital.	11/24/2023 10:44 AM
11	This point highlights the need for clinical supervision. To inform best practice clinical supervision provides a space to reflect on and critically analyse the work with clients.	11/22/2023 11:41 PM
12	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:29 PM
13	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:19 PM
14	I'm not sure a psychotherapy and counselling degree programme would facilitate this kind of insight & reflection which really helps one to critically analyse. It would really need to be a very academic training programme for one to do this.	11/14/2023 1:21 AM
15	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:06 PM
16	be able to identify factors affecting the dynamics and to evaluate these with client, offering explanations and suggested solutions	10/20/2023 9:05 PM
17	clinical supevision not just 'supervision' needs to be a part of training in order to meet this standard	10/18/2023 11:04 AM

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18	The lack of professional and mandatory supervision, currently established is missing here. It has to be set as standard	10/3/2023 10:45 AM
19	With out this as a threshold there is no learning or development of the therapist and the therapy can become very one-sided	9/25/2023 10:37 AM
20	ditto above	9/13/2023 8:30 PM

Q28 Standard 5.21 Be able to recognise personal emotional responses, vicarious trauma and the need to develop effective self-care strategies and burnout prevention.

Answered: 160 Skipped: 268



ANSWER CHOICES	RESPONSES	
Consider threshold	81.88%	131
Do not consider threshold	6.88%	11
Partly threshold	11.25%	18
TOTAL		160

Q29 If you do not consider Standard 5.21 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 29 Skipped: 399

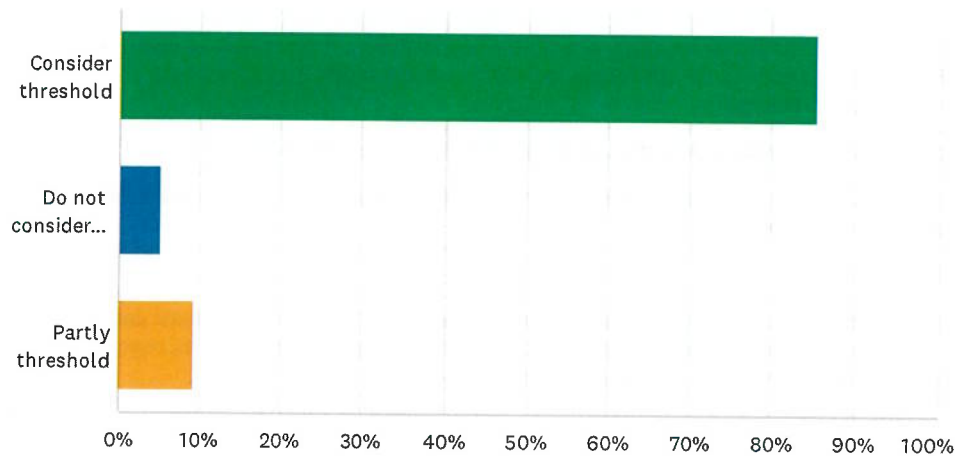
#	RESPONSES	DATE
1	This must be done in sustained and intensive personal psychotherapy in the first instance.	12/1/2023 1:33 AM
2	Supervision and own therapy essential to this	11/30/2023 9:51 PM
3	To be able to do this a person needs good self awareness. This is developed through personal and group therapy. I understand that therapy can not be assessed but it is still a necessary experience for the developing psychotherapist. Without it, there is a higher chance burnout and vicarious trauma.	11/30/2023 7:11 PM
4	Self care management also the remit of clinical supervision	11/30/2023 12:29 PM
5	This may need some revision to reflect psychotherapy-specific practice.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession. [REDACTED]	11/30/2023 12:13 PM
6	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:18 PM
7	Requirements re process groupwork and individual therapy in training do not support the objectives	11/28/2023 6:36 PM
8	To achieve 5.21 ALL of the following are critical to the therapists self care For 5.21 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:59 AM
9	Having ones own personal therapy during training is paramount for the psychotherapists own wellbeing and future work with clients.	11/24/2023 1:19 PM
10	Again the concept of the individual being the fulcrum for this is very concerning and would not meet what would be considered good practice in the world of Cognitive Behavioural Psychotherapy. While personal understanding is useful and important it is of vital importance this is directly linked to clinical supervision otherwise we run the risk of poor outcomes for the service user and the psychotherapist.	11/24/2023 10:51 AM
11	I do believe that clinical supervision on an ongoing basis is important with regard to developing and maintaining effective self-care strategies. Also ongoing personal counselling through training is vital to ensure both recognition and working through personal emotional responses, so that the work has been done as much as is possible prior to a therapist sitting with a client.	11/22/2023 11:47 PM
12	I absolutely believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:20 PM
13	In most cases yes but this is also the critical role supervision plays in the difficult work undertaken by psychotherapists. It is important to know your own limitations, your personal issues but supervision plays a vital role in supporting therapists in managing their professional and personal work.	11/22/2023 4:25 PM
14	THE wording does not meet current training and best practice in psychotherapeutic practise - I feel the wording should be have engaged sufficiently in own therapeutic work individually and in group so has to gain the skill in recognising personal emotional responses, have dealt with own trauma and hence understand the implications of vicarious trauma so as to develop effective self care strategies and to engage in ongoing professional clinical supervision to achieve this.	11/22/2023 3:18 PM
15	This is not possible without the need for mandatory personal therapy of therapist during	11/22/2023 2:04 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes
(Psychotherapists)
training and mandatory clinical supervision

16	I Dont think the threshold is raised high enough for such an important issue	11/22/2023 1:22 PM
17	Personal therapy is a must in order to raise awareness for therapists working in this field ' to be able to identify the above along with regular supervision	11/15/2023 10:46 PM
18	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:25 AM
19	CBT oriented	11/1/2023 4:49 PM
20	Personal psychotherapy is necessary to achieve this, you have not referenced this anywhere.	10/25/2023 2:45 PM
21	The capacity to do this is linked to persoanl growth and development which would be strengthened by engagement in personal therapy. This should be required.	10/22/2023 11:35 AM
22	it would be clearer to separate transference and relational responses from secondary trauma and burnout as different active processes would be required from the therapist - transference is more likely to require collaborative processes with the client	10/20/2023 9:08 PM
23	This is a significant consideration when providing psychotherapy to clients. This standard is true in that there needs to be a clear understanding of your own personal emotional responses. However the criteria drafted does not stipulate any requirment for personal therapy or clinical supervision, which in my opinion is a serious and worrying ommision. Personal therapy was one of the most important parts of my training as a Psychotherapist. It is essential to have the ability of evaluating what is mine and what is the clients', and personal therapy is critical in the development of this skill and understanding.	10/18/2023 11:05 AM
24	I do not believe that this threshold will be met if personal therapy is not a mandatory part of training	10/11/2023 10:45 PM
25	Burnout is largely an organizational factor, would be helpful to incorporate this	10/5/2023 4:58 PM
26	The same need for mandatory supervision for this exact reason is missing in the draft. This is currently standard practice for psychotherapy, as well as counselling	10/3/2023 10:46 AM
27	These can be learned in different sectors and organizations, but should be continually watched for	9/25/2023 10:42 AM
28	Perhaps also 'recognise and RESPOND' to personal emotional REACTIONS? Could cover internal supervisor, counter transference, and how personal process may disrupt or hijack the client's therapeutic experience	9/14/2023 1:26 PM
29	undermines our profession lowering the standards	9/13/2023 8:30 PM

Q30 Standard 5.22 Be able to maintain professional and ethical boundaries with service users and be able to identify and manage any associated challenges.

Answered: 159 Skipped: 269



ANSWER CHOICES	RESPONSES	
Consider threshold	85.53%	136
Do not consider threshold	5.03%	8
Partly threshold	9.43%	15
TOTAL		159

Q31 If you do not consider Standard 5.22 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 23 Skipped: 405

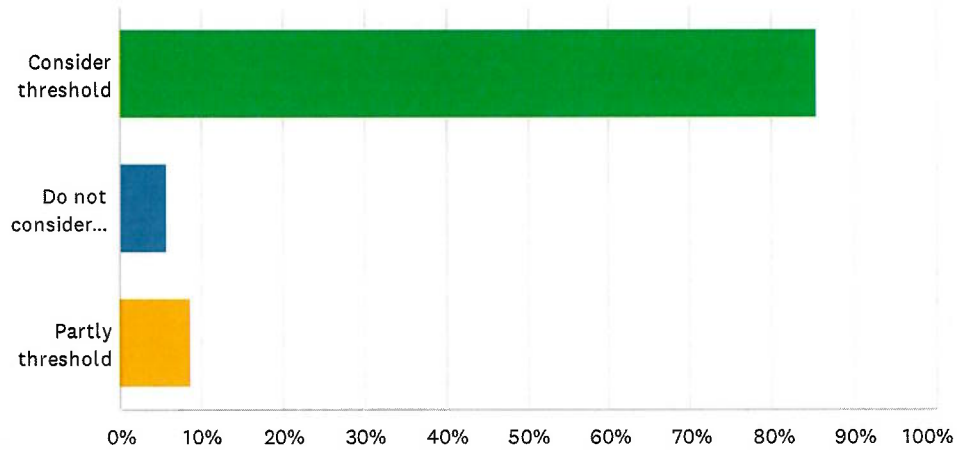
#	RESPONSES	DATE
1	Have the ability to maintain professional and ethical boundaries with service users and have the ability to manage associated challenges including seeking supervisory assistance in relation to threats to boundaries	12/1/2023 4:09 PM
2	This skill needs to be enhanced by the use of modality specific supervision	12/1/2023 8:49 AM
3	You must consult with your clinical supervisor for support on this, including when there are any breaches of boundaries.	12/1/2023 1:33 AM
4	Supervision is critical	11/30/2023 9:51 PM
5	In order to be able to maintain professional and ethical boundaries, a psychotherapist need regular reflection on their work with a supervisor. It not a once off proficiency, its an ongoing learning throughout ones career as a psychotherapist.	11/30/2023 7:11 PM
6	Including managed by clinical supervision	11/30/2023 12:29 PM
7	Suggested revision: 'Be able to maintain professional and ethical boundaries with service users and be able to identify and manage any associated challenges, including seeking supervisory assistance in relation to threats to boundaries.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession. [REDACTED]	11/30/2023 12:13 PM
8	Be able to maintain professional and ethical boundaries with service users and be able to identify and manage any associated challenges in a therapeutic manner (rationale: sometimes psychotherapists seek to manage the boundary challenge without sensitivity to the needs of the service user and this would not necessarily be safe enough practice)	11/29/2023 5:27 PM
9	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:18 PM
10	Psychotherapist's own personal therapy and Supervision are vital to helping them define therapeutic boundaries and explore the therapeutic r/ship with their clients	11/28/2023 8:42 PM
11	For 5.22 to be achieved the following is required . Point ii)250 hours of personal therapy listed below is of critical relevance i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:59 AM
12	Again this needs (within the principles of good cognitive behavioural psychotherapy practice) to be directly linked again to good clinical supervision and should be enshrined in the standards.	11/24/2023 10:51 AM
13	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:30 PM
14	This should read "manage appropriately" . Could this section reference the Code of Ethics, which I note is not yet available?	11/22/2023 10:21 AM
15	It is very important and regular supervision supports this and needs to be emphasised	11/15/2023 10:46 PM
16	I think a therapist would need ongoing supervision & CPD.	11/14/2023 1:25 AM
17	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:08 PM
18	how can this develop without personal therapy	10/25/2023 2:44 PM

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19	following professional body codes of conduct	10/20/2023 9:08 PM
20	There is no stipulation in the criteria for ongoing clinical supervision throughout training. This is an essential part of developing an ability to meet this standard.	10/18/2023 11:05 AM
21	same issue, mandatory supervision is missing in the draft	10/3/2023 10:46 AM
22	Should not be up for discussion, as it is essential	9/25/2023 10:42 AM
23	ditto above comment	9/13/2023 8:30 PM

Q32 Standard 5.23 Be able to practise therapy that is within psychotherapist's level of skill, knowledge and professional judgement.

Answered: 159 Skipped: 269



ANSWER CHOICES	RESPONSES	
Consider threshold	85.53%	136
Do not consider threshold	5.66%	9
Partly threshold	8.81%	14
TOTAL		159

Q33 If you do not consider Standard 5.23 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 24 Skipped: 404

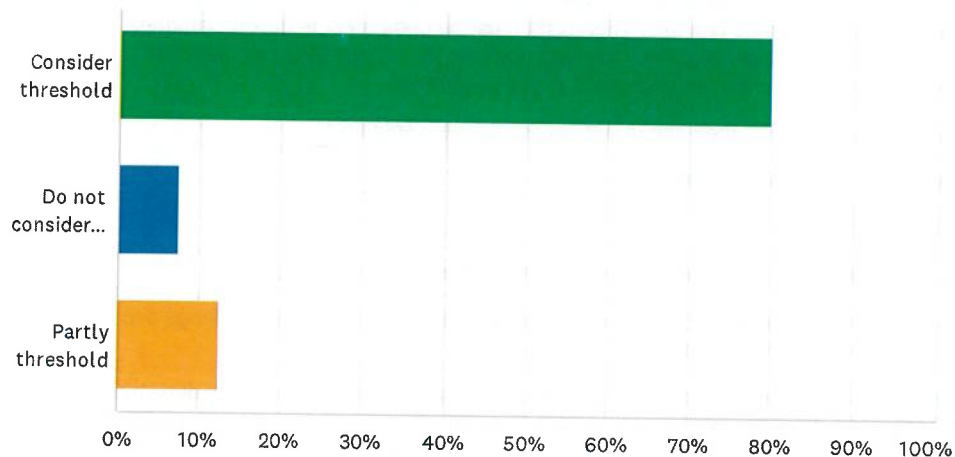
#	RESPONSES	DATE
1	Have the ability to practice therapy that is within the psychotherapists level of skill, knowledge and professional judgement. In addition the therapist should have the ability to identify areas for which one has insufficient training and not engage in that work until they have the appropriate training	12/1/2023 4:09 PM
2	This is important, but of course everyone also has to learn by client work too and does not start out as experienced.	12/1/2023 2:39 PM
3	Identify needs for further training or personal psychotherapy/development.	12/1/2023 1:33 AM
4	Supervision is critical	11/30/2023 9:51 PM
5	Again this is not a proficiency that is gained and then is sufficient, its an ongoing skill that continues to develop through reviewing ones work with the support of a supervisor	11/30/2023 7:11 PM
6	psychotherapist must be given the opportunity to build up their skills and knowledge and the best way to do this is clinical practice.	11/30/2023 1:00 PM
7	Again, demonstrates the vital need for clinical supervision	11/30/2023 12:29 PM
8	Suggested revision: 'Be able to practise therapy that is within psychotherapist's level of skill, knowledge and professional judgement; identify areas for which one has insufficient educational and supervised clinical training and not engage in work in this instance.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:13 PM
9	If the therapist is not aware of their limitations and operate outside of they, that is dangerous for the client	11/29/2023 1:18 PM
10	Psychotherapist's own personal therapy and Supervision are vital to helping them define therapeutic boundaries and explore the therapeutic r/ship with their clients	11/28/2023 8:42 PM
11	This is one of the many functions of clinical supervisions and an ongoing process to observe	11/28/2023 3:47 PM
12	For 5.23 to be achieved the following is required NQL Level 9 is or particular relevance. i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 9:59 AM
13	i would ensure the words 'minimum competency' and adhering to the minimum training standards and relevant code of ethical standards of the relevant professional body. The Irish Association Of Behavioural and Cognitive Psychotherapies linked to the BABCP which is recognised as the lead organisation for CBP and is the largest membership body for CBP in Europe would be that body for CBP.	11/24/2023 10:51 AM
14	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:20 PM
15	Personal therapy is one of the best ways to ensure we can do this along with regular supervision	11/15/2023 10:46 PM
16	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:25 AM
17	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:08 PM
18	how would this be assessed without clinical supervision.	10/25/2023 2:44 PM

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19	A bit meaningless as 'to be able to', and the use of 'within', implies that the psychotherapist actually has the 'skill, knowledge and professional judgement' so there is no way that this proficiency cannot be met.	10/21/2023 6:39 PM
20	A level 8 graduate will not have the level of skill, knowledge and professional judgement, that current level 9 practicing psychotherapists have.	10/18/2023 11:05 AM
21	This is important. How is the scope of practice to be identified and managed?	10/5/2023 4:58 PM
22	same issue, that of mandatory supervision, is missing in the draft	10/3/2023 10:46 AM
23	Client seek assistance and it should be available form the therapist and not limited to what they don't know otherwise we are providing specialized assistance without informing clients of this.	9/25/2023 10:42 AM
24	ditto above comment	9/13/2023 8:30 PM

Q34 Standard 5.24 Be able to critically reflect on conscious and unconscious dynamics in the therapeutic process and be able to manage their personal involvement in, and contribution to, the process of psychotherapy.

Answered: 159 Skipped: 269



ANSWER CHOICES	RESPONSES	
Consider threshold	79.87%	127
Do not consider threshold	7.55%	12
Partly threshold	12.58%	20
TOTAL		159

Q35 If you do not consider Standard 5.24 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 33 Skipped: 395

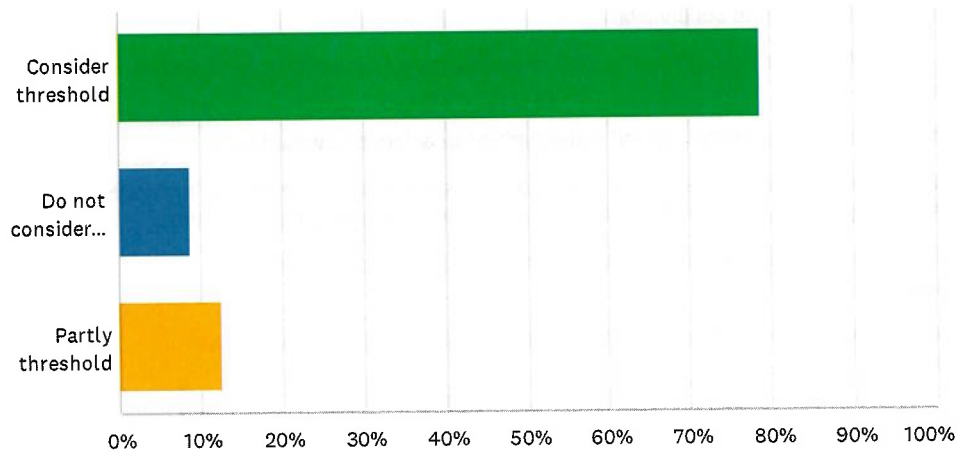
#	RESPONSES	DATE
1	Therapists should have the ability to critically reflect on conscious and unconscious dynamics in the therapeutic process. Therapists must be competent in making informed clinical decisions and have the ability to reflect and able to manage their own personal involvement and contribution to the process of Psychotherapy	12/1/2023 4:16 PM
2	Unconscious dynamics by their nature will not always be identifiable.	12/1/2023 2:40 PM
3	Integrate these into clinical decisions.	12/1/2023 1:35 AM
4	Supervision is critical	11/30/2023 9:52 PM
5	This is an ongoing skill development through the process of clinical supervision	11/30/2023 7:14 PM
6	psychotherapist must be given the opportunity to build up their skills and knowledge and the best way to do this is clinical practice.	11/30/2023 1:02 PM
7	Suggested Revision: 'Be able to critically reflect on conscious and unconscious dynamics in the therapeutic process, must be competent to make informed clinical decisions based on these reflections, and be able to manage their personal involvement in, and contribution to, the process of psychotherapy.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession. [REDACTED]	11/30/2023 12:14 PM
8	This does not sufficiently represent the broadly accepted norms of psychotherapy as it insufficiently and unsafely fails to acknowledge the requirement of psychotherapists' awareness of, as well as ability to manage, their own unconscious processes and triggers. The reference to unconscious processes insufficiently address these processes in the therapist, and therefore safety is not assured. 5.24 could read "Be able to critically reflect on the conscious and unconscious dynamics of both the service user and the practitioner in the therapeutic process and be aware of and manage their personal involvement in, and contribution to, the process of psychotherapy".	11/29/2023 5:27 PM
9	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:18 PM
10	Again here, the Psychotherapist's own personal therapy and Supervision are vital to helping them reflect on dynamics, conscious and unconscious, in the process with their clients	11/28/2023 8:45 PM
11	As previous response	11/28/2023 6:36 PM
12	Personal therapy should always be a requirement for those entering the profession and shouldn't be a minimum requirement around self care. It is a must have	11/28/2023 1:29 PM
13	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapist For 5.24 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 10:03 AM
14	Ones own personal therapy is essential for this awareness to develop ever before we sit with another human being! Experiential Group Process in Training essential for the above capacity to develop within the student.	11/24/2023 1:23 PM
15	Again as with previous comments in Cognitive Behavioural Psychotherapy this would be considered important but not enough this needs reflected on in clinical supervision in order to ensure the structure of the CBP session is maintained and the psychotherapist stays on model.	11/24/2023 10:55 AM

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16	Clinical supervision contributes to critical reflection and flagging necessary area of work for the therapist.	11/22/2023 11:50 PM
17	The language and terminology used is not in keeping with the practice of psychotherapy	11/22/2023 6:32 PM
18	I believe the suggested core training levels would not give the therapist the required capacity	11/22/2023 5:20 PM
19	Again the wording of this standard is of concern - I think the wording should reflect the standard of proficiency met through engagement in own therapeutic process which will offer trainees a lived experience of understanding conscious and unconscious dynamic.	11/22/2023 3:20 PM
20	Requires mandatory clinical supervision	11/22/2023 2:04 PM
21	We can only fully do this if we adhere to EAP requirements of Supervision and Personal Therapy	11/15/2023 10:50 PM
22	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:26 AM
23	This sounds more specific to the field of psychoanalysis. While it is essential to be aware of subconscious dynamics, the skill level here may differ between particular modalities.	11/3/2023 1:43 PM
24	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:09 PM
25	This is not strong enough, it also needs to emphasise how this information is used therapeutically.	10/25/2023 2:48 PM
26	This is not strong enough. It needs clarity how the therapist is able to use this information to make a sound clinical decision.	10/25/2023 2:47 PM
27	As well as critically reflect, the psychotherapist must be competent to make informed clinical decisions based on these reflections.	10/21/2023 6:39 PM
28	Personal therapy as a component of a training course is essential in achieving this standard.	10/18/2023 11:05 AM
29	I believe personal therapy to be necessary for this threshold to be met	10/11/2023 10:46 PM
30	same issue, that of missing mandatory supervision, currently standard, is missing in the draft	10/3/2023 10:48 AM
31	higher standard not minimum threshold needs to set a higher standard	9/13/2023 8:30 PM
32	Supervision helps greatly with the unconscious dynamics	9/8/2023 2:38 PM
33	This feels very weighted to a psychoanalytical psychodynamic approach, other approaches would use differing language	9/7/2023 12:23 PM

Q36 Standard 5.25 Be able to critically reflect on conscious and unconscious dynamics in supervision and be able to manage their personal involvement in, and contribution to, the process of supervision.

Answered: 159 Skipped: 269



ANSWER CHOICES	RESPONSES	
Consider threshold	78.62%	125
Do not consider threshold	8.81%	14
Partly threshold	12.58%	20
TOTAL		159

Q37 If you do not consider Standard 5.25 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 32 Skipped: 396

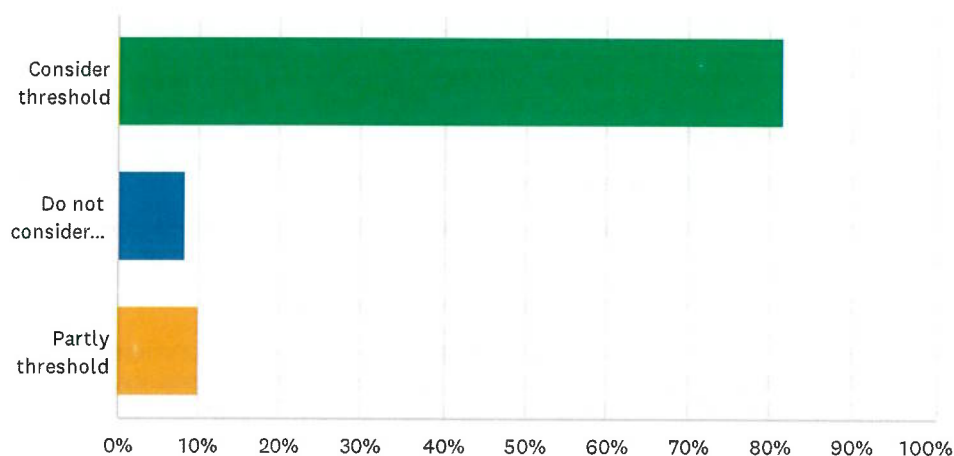
#	RESPONSES	DATE
1	I have concern that the implicit role and competence of supervision within the practice of Psychotherapy is being assume without being enumerated - and there appears to be no register or standards being applied by CORU's draft as to the practice of Supervision which requires additional training, qualifications and registration. I propose that CORU consider reverting to the minister for powers to establish a third Supervision Register with proficiency standards and quals that will allow for the role of Supervision in both Counselling and the Psychotherapy Registers to be complimented with transparent standards of Supervision Practice within the professions.	12/1/2023 4:24 PM
2	Therapists need to have the ability to reflect on the conscious and unconscious dynamics in supervision and be able to manage personal involvement and contribution to the process of clinical supervision	12/1/2023 4:16 PM
3	Same reason as above.	12/1/2023 2:40 PM
4	Perhaps you might include here what i have indicated in previous questions	11/30/2023 9:52 PM
5	perhaps the supervisor would be the expert here and may on occasion guide the supervisee.	11/30/2023 7:56 PM
6	supervision is important part of the learning process and should be available from the start of education.	11/30/2023 1:02 PM
7	Specifically clinical supervision is more appropriate	11/30/2023 12:29 PM
8	Suggested Revision: 'Be able to develop an ability to identify and reflect on conscious and unconscious dynamics in supervision and be able to manage their personal involvement in, and contribution to, the process of clinical supervision.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:14 PM
9	The comment for 5.24 applies, but it is less a public safety issue in supervision.	11/29/2023 5:27 PM
10	My professional belief is supervision is fundamental to the working therapist, so they may reflect their therapeutic approaches etc., with a qualified & skilled supervisor.	11/29/2023 3:03 PM
11	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:18 PM
12	Supervision vital	11/28/2023 8:45 PM
13	Supervision is absolutely clearly needed by all therapists to ensure that they are working ethically and within their own capabilities. It is important that supervision is recognised as more than a minimum requirement.	11/28/2023 1:29 PM
14	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapist For 5.25 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 10:03 AM
15	Comment same as for No 29 & 35.	11/24/2023 1:23 PM
16	The wording of this could be construed to focus on the supervision relationship this again would be important but it is not enough I would look at combining 5.24 and 5.25	11/24/2023 10:55 AM
17	Monthly supervision is the minimum	11/24/2023 9:45 AM
18	The language and terminology used is not in keeping with the practice of psychotherapy.	11/22/2023 6:32 PM

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(Psychotherapists)

19	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:20 PM
20	Regular Supervision and Personal therapy are a pre-requisite to raising awareness to this	11/15/2023 10:50 PM
21	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:26 AM
22	How will this be assessed? How is one to know if a therapist has successfully reflected on unconscious dynamics?	11/3/2023 1:43 PM
23	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:09 PM
24	This needs to refernce clincal supervision as this is different to "supervision". Clinical supervision is absoloutely critical.	10/25/2023 2:48 PM
25	it is not referencing clinical supervision.	10/25/2023 2:47 PM
26	This needs to relate to clinical supervision which is a cornerstone of psychotherapy training and practice.	10/22/2023 11:37 AM
27	Not strong enough. There needs to be clarification that this refers to the process of CLINICAL supervision as this reflection occurs in the clinical supervision space and not in any other arena (e.g. not in line management or with another psychotherapist that is not the clinical supervisor).	10/21/2023 6:39 PM
28	Clinical supervision, not just supervision needs to be a part of the criteria to achieve this.	10/18/2023 11:05 AM
29	Again I believe personal therapy is necessary for the individual insight required for this	10/11/2023 10:46 PM
30	the foundation, that of supervision needing to be mandatory, is missing	10/3/2023 10:48 AM
31	ditto above comment	9/13/2023 8:30 PM
32	This feels very weighted to a psychoanalytical psychodynamic approach, other approaches would sue differing language	9/7/2023 12:23 PM

Q38 Standard 5.26 Be able to articulate the parameters and value of clinical supervision and demonstrate the ability to utilise supervision to assist in practice review and in areas for development.

Answered: 158 Skipped: 270



ANSWER CHOICES	RESPONSES	
Consider threshold	81.65%	129
Do not consider threshold	8.23%	13
Partly threshold	10.13%	16
TOTAL		158

Q39 If you do not consider Standard 5.26 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 22 Skipped: 406

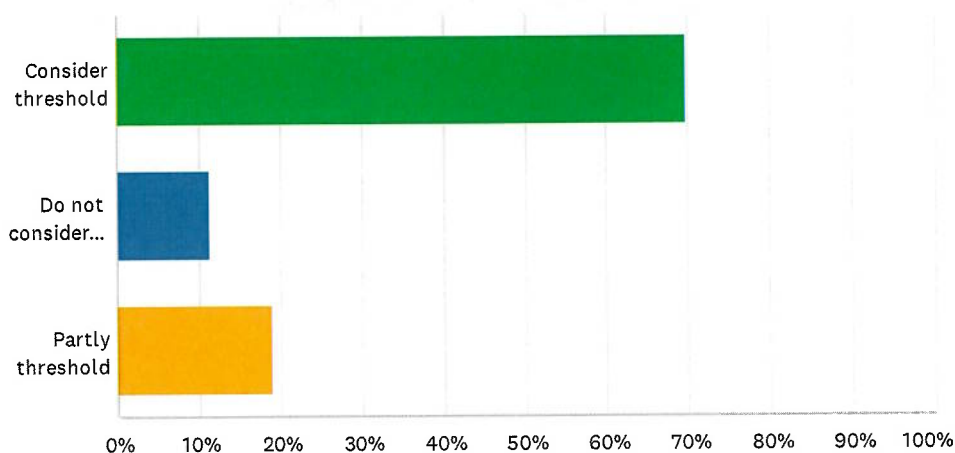
#	RESPONSES	DATE
1	Psychotherapists should have the ability to articulate the parameters, importance and value of clinical supervision and demonstrate the ability to utilize clinical supervision to assist in practice review and identifies areas of development need.Modality Specific Supervision may be necessary in some instances	12/1/2023 4:16 PM
2	Lack of clarity around the essential necessity for supervised practice.	12/1/2023 11:23 AM
3	supervision is important part of the learning process and should be available from the start of education.	11/30/2023 1:02 PM
4	Inconsistent that clinical supervision is stated here yet not a training requirement?	11/30/2023 12:29 PM
5	Suggested revision: 'Be able to articulate the parameters, importance and value of clinical supervision and demonstrate the ability to utilise clinical supervision to assist in practice review and in areas for development.* Additional Proposed Proficiency: 'Engage in appropriate ratios of clinical supervision to clinical practice, and demonstrate a commitment to continuing in this post-training.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:14 PM
6	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:18 PM
7	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapist For 5.26 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space	11/26/2023 10:03 AM
8	Again this would also need to look at this in greater detail as it applies to the service users progress in treatment.	11/24/2023 10:55 AM
9	Monthly supervision is the minimum	11/24/2023 9:45 AM
10	I am curious about the wording - to articulate the parameters and value is not sufficient. The attendance in clinical supervision is necessary for best practice, protection of client and the therapist to ensure the best work possible is being done for the client.	11/22/2023 11:50 PM
11	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 5:20 PM
12	Clinical supervision should read "practice supervision". Clinical Supervision has a particular meaning in current practice that can differ across modalities. We expect that a common meaning for practice supervision will emerge as the profession is regulated. Consequently we consider Practice Supervision to be a clearer and less contested term.	11/22/2023 10:24 AM
13	Supervision needs to be emphasised more in the draft policy in order to achieve this	11/15/2023 10:50 PM
14	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:26 AM
15	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:09 PM
16	No refernce to actually engaging in clinical supervision or the necessary ratios - these need to be stated clearly and match European standards. Clinical supervisors should be linked to training providers and have an assessment role.	10/25/2023 2:48 PM
17	engagement in appropriate ratios is required.	10/25/2023 2:47 PM

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18	As well as recognising value in clinical supervision, the psychotherapist needs to actually engage in this in sufficient ratio to clinical practice.	10/22/2023 11:37 AM
19	Not strong enough. Perhaps something like "Be able to articulate the parameters, importance, and value of clinical supervision and demonstrate the ability to utilise clinical supervision to assist in practice review and in areas for development. Additional proficiency also needed here. Something like "Engage in appropriate ratios of clinical supervision to clinical practice and demonstrate a commitment to continuing in this post training'.	10/21/2023 6:39 PM
20	be able to assess value and parameters of supervision experienced	10/20/2023 9:09 PM
21	Working effectively with supervisors should ensure these parameters are in place	10/18/2023 4:54 PM
22	the issue of supervision needing to be mandatory is missing from the draft	10/3/2023 10:48 AM

Q40 Standard 5.27 Be able to demonstrate skill in the technologies and communication methods required for the delivery of therapy in a virtual setting, and be able to apply these therapeutically and safely while protecting service user privacy and confidentiality.

Answered: 158 Skipped: 270



ANSWER CHOICES	RESPONSES	
Consider threshold	69.62%	110
Do not consider threshold	11.39%	18
Partly threshold	18.99%	30
TOTAL		158

Q41 If you do not consider Standard 5.27 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 37 Skipped: 391

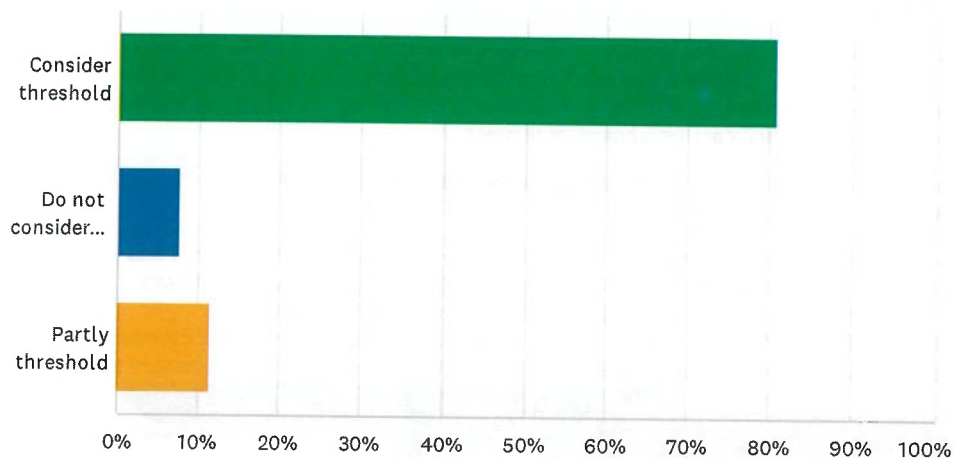
#	RESPONSES	DATE
1	Therapists need to have the ability to consider the use of technology in the provision of psychotherapy , they should also be aware of the adjustments that this way of working requires .	12/1/2023 4:24 PM
2	This is a service issue not a psychotherapy one.	12/1/2023 4:23 PM
3	Psychotherapy, as opposed to counselling or educational processes, engages with unconscious as well as conscious dynamics; these cannot be adequately monitored online.	11/30/2023 12:43 PM
4	Comment: We are uncertain about whether this should be included as a core part of training or as a part of post-qualifying CPD. As there are many competing elements in training – academic, personal psychotherapeutic practice, clinical supervision — this may not be a priority.* Suggested revision: 'Be able to consider the use of technology in the conduct of psychotherapy, the adjustments that this kind of work involves, and the impact that this has on the nature and quality of the practice of psychotherapy.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:17 PM
5	Online sessions are a welcome addition to the therapeutic experience, though my belief is the in-person work is more valuable to the client.	11/29/2023 3:04 PM
6	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:19 PM
7	if applicable	11/28/2023 3:53 PM
8	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapy For 5.27 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space v) It is critical that therapist are very experienced in face-to-face Gold Standard of therapy experience BEFORE online therapy is practiced. For minimum levels of Online practice to be achieved there needs to be robust training in the critical differences,between online & face-to-face practice with regard to risk management issues, GDPR, Technology issues etc.	11/26/2023 10:11 AM
9	There are many who will choose not to work in a virtual setting, so will not require proficiency in this area. Perhaps wording 'Where choosing to work virtually be able to demonstrate....' etc	11/22/2023 11:53 PM
10	Psychotherapists require additional psychotherapy skills training to work virtually	11/22/2023 6:34 PM
11	I believe this to be a CPD standard and focus should be on in person delivery of psychotherapy before use of technology.	11/22/2023 3:22 PM
12	This would be a personal choice whether to engage in working in a virtual setting and should not be an absolute threshold.	11/22/2023 2:28 PM
13	Recognize that extra training needed in the supply of said virtual therapy	11/22/2023 1:26 PM
14	We believe that specific reference to data privacy and data protection is required in this standard.	11/22/2023 10:28 AM
15	For some practitioners working virtually with clients is not an option, as Psychotherapy is very personal work for both client & therapist so some therapists require the in-person engagement which cannot be achieved virtually. It would be unfair to mandate a virtual setting for such practitioners.	11/20/2023 3:49 PM

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16	Is this essential for those who don't practice online?	11/20/2023 3:23 PM
17	Good online training would be a pre-requisite for this & most courses at the moment do not include this	11/15/2023 10:53 PM
18	Not all therapists will want to work online or in a virtual setting so if this said where applicable it would be better	11/3/2023 11:39 AM
19	this should only be threshold if the psychotherapist is choosing to work in a virtual setting	10/25/2023 8:14 PM
20	Should be considered as CPD rather than part of core training.	10/25/2023 2:51 PM
21	Virtual therapy should be CPD training after core training.	10/25/2023 2:51 PM
22	A practice can exist with integrity without availing of tech	10/24/2023 3:20 PM
23	This is more for CPD than for core training.	10/22/2023 11:43 AM
24	This one may well be irrelevant in primary training and may be best engaged in during post qualifying CPD.	10/21/2023 6:39 PM
25	training in adaptations for online work required	10/20/2023 9:12 PM
26	Offering online therapy should be based on the personal preference of the psychotherapist and not mandated.	10/20/2023 2:28 PM
27	I question whether this requirement should be a CPD element rather than criteria for core training.	10/18/2023 11:06 AM
28	This is important, but there will be very little opportunity in organisations to deliver service in this way	10/5/2023 5:03 PM
29	This is part of the life long learning of therapy	9/25/2023 10:45 AM
30	Not all therapists/counsellors offer online therapy/counselling	9/18/2023 10:04 PM
31	Some psychotherapists do not use virtual technologies, this should not be a requirement. Research shows face to face psychotherapy is more effective. Limitations of virtual therapy must be recognised; for example, in working with children and at risk clients.	9/14/2023 8:01 AM
32	should be a higher standard undermines our profession	9/13/2023 8:31 PM
33	While this may well be relevant to future graduates and training programs, when it comes to the two year Grandparenting period, I believe this is a skill some senior psychotherapists may not have developed. ie not all currently qualified and accredited psychotherapists or supervisors offer online sessions.	9/10/2023 12:31 PM
34	Only for those who are willing to work in that way.	9/7/2023 5:01 PM
35	This should not be a requirement of every psychotherapist but should be for those who work online	9/6/2023 6:25 PM
36	issues around internet safety/confidentiality remain unresolved	9/5/2023 3:41 PM
37	If the practitioner chooses to provide online sessions	9/5/2023 12:55 PM

Q42 Standard 5.28 Be able to identify, distinguish and critically evaluate the level and impact of trauma on psychological functioning, and be able to work therapeutically with service users who have experienced trauma.

Answered: 157 Skipped: 271



ANSWER CHOICES	RESPONSES	
Consider threshold	80.89%	127
Do not consider threshold	7.64%	12
Partly threshold	11.46%	18
TOTAL		157

Q43 If you do not consider Standard 5.28 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 25 Skipped: 403

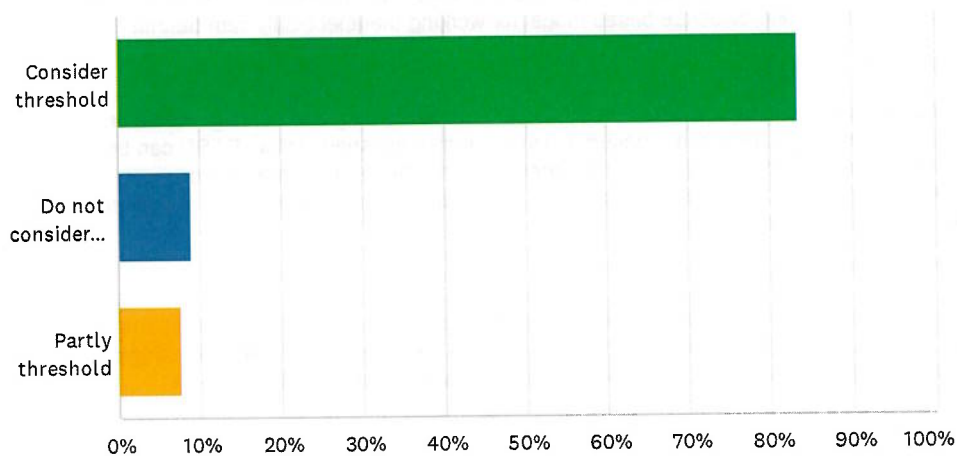
#	RESPONSES	DATE
1	Psychotherapists should be able to identify, distinguish, and critically evaluate the level and impact of trauma on psychological and and systemic functioning and be able to work in a way that is safe and appropriate with service users who have experienced trauma and who may be experiencing significant psychological distress	12/1/2023 4:24 PM
2	Perhaps you could indicate they types of trauma that are worked with, within the therapeutic process	11/30/2023 10:06 PM
3	Suggested revision: 'Be able to identify, distinguish, and critically evaluate the level and impact of trauma on psychological functioning, and be able to work therapeutically with service users who have experienced trauma and/or are experiencing significant psychological distress.'* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:17 PM
4	the limitation to psychological functioning is not aligned with humanistic approaches to psychotherapy where the whole person is taken into account. Psychotherapists work with complex trauma and that needs to be specified as a threshold therapeutic skill. 5.28 could read: "Be able to identify, distinguish and critically evaluate the level and impact of trauma on service user functioning, and be able to work therapeutically with service users who have experienced complex trauma"	11/29/2023 5:28 PM
5	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:19 PM
6	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapy For 5.28 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space v) It is critical that therapist are very experienced in face-to-face Gold Standard of therapy experience BEFORE online therapy is practiced. For minimum levels of Online practice to be achieved there needs to be robust training in the critical differences, between online & face-to-face practice with regard to risk management issues, GDPR, Technology issues etc. vi) Therapist MUST be trained in Trauma Practice BEFORE the therapist engages in working with members of the public who have experience ongoing trauma in their daily lives.	11/26/2023 10:11 AM
7	This is important this I feel would need greater clarity I would want to see the words 'assess' 'formulate' included here I would also want to see the use of a diagnostic manual such as the DSM-5 or ICD-11 and I would want to see 'work therapeutically with trauma in line with best practice the evidence base and recommended guidelines. Trauma can be a difficult area to work in and its important we be specific in order to reduce the potential for harm	11/24/2023 11:00 AM
8	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 7:12 PM
9	The language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:34 PM
10	This is a very specialised area and would require more training after the basic training	11/15/2023 10:53 PM
11	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:26 AM
12	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:11 PM
13	It needs to consider any experience of major distress and or impaired functioning for any	10/25/2023 2:51 PM

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14	This needs to be widened to include anyone who has considered major distresses, impaired functioning is not solely related to trauma.	10/25/2023 2:51 PM
15	Useful but not necessary. Can refer on if trauma is there or work safely if trauma not relevant	10/24/2023 3:20 PM
16	'work therapeutically' is a bit weak. The psychotherapist needs to address the trauma in a way that will build resources, and alleviate the psychological distress of the client.	10/22/2023 11:43 AM
17	Add and/or are experiencing significant psychological distress.	10/21/2023 6:39 PM
18	to work from a trauma informed approach and identify impact on all areas of functioning and be trained in at least one evidence based model for working therapeutically with trauma	10/20/2023 9:12 PM
19	as stated in Q5	10/18/2023 11:06 AM
20	Again, due to concept creep, trauma has come to mean everything and nothing. Would be helpful to define trauma, how is it measured? How is it distinguished? While PTSD can be assessed and measured, complex trauma currently cannot be as there are no measures of it. The DSM and ICD-11 do have assessments, but these are outside the scope of a level 8 degree psychotherapy degree to assess	10/5/2023 5:03 PM
21	This may be developed as they develop	9/25/2023 10:45 AM
22	Perhaps also mention the significant role that trauma is likely to play in the manifestation of various psychiatric presentations such as voice hearing, that often get framed as biological process and yet which are often rooted in early trauma and attachment problems.	9/14/2023 1:30 PM
23	ditto above	9/13/2023 8:31 PM
24	I would not use the word trauma and instead would use the word psychological difficulties. There is also no reference to any of the methods being evidence-based. It is important that treatments used are evidence-based where possible.	9/13/2023 4:53 PM
25	That depends on how much info we can get from the client	9/8/2023 2:39 PM

Q44 Standard 5.29 Be able to identify potential risk for suicide, self-harm or harm to others and implement early management, supporting the immediate safety of the service user, and make referrals for additional treatment.

Answered: 157 Skipped: 271



ANSWER CHOICES		RESPONSES	
Consider threshold		83.44%	131
Do not consider threshold		8.92%	14
Partly threshold		7.64%	12
TOTAL			157

Q45 If you do not consider Standard 5.29 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 25 Skipped: 403

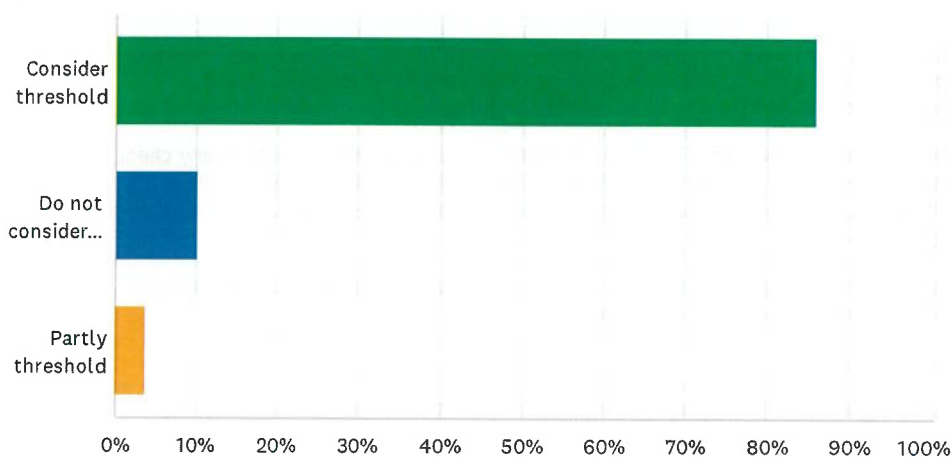
#	RESPONSES	DATE
1	The ability to identify potential risk for suicide or self harm to others , implement early management supporting the immediate safety of the service user , make appropriate onward referrals where indicated and demonstrate competence in making complex judgements about on-going work with high risk clients .	12/1/2023 4:24 PM
2	A psychotherapist must also be able to work with such distressed clients and not abandon them unless it is beyond their professional competence. Further rejection, panic, judgement of feelings/distress could lead to trauma becoming complex trauma, shame, sense of being worthless or 'too much'.	12/1/2023 1:39 AM
3	Client rather than service user	11/30/2023 10:06 PM
4	therapists must be able to assess their own level of confidence while working with a client with suicide thoughts and be able to refer them on when necessary	11/30/2023 1:06 PM
5	It is not automatic that the client is referred out of the safety of the existing therapeutic relationship.	11/30/2023 12:29 PM
6	Comment: Though it may not be the intention, this seems to imply that suicidal risk will lead to the termination of this work and the referral to someone else who would take this up. In many instances, it is important that this work continue, and that whatever contacts are made and supports sought following such an assessment of risk go alongside the continuing psychotherapeutic work (apart from in situations where this is assessed to not be possible or beneficial). * Suggested revision: 'Be able to identify potential risk for suicide, self-harm or harm to others; implement early management, supporting the immediate safety of the service user; make referrals for additional treatment where indicated; and demonstrate competence in making complex judgements about ongoing work with high-risk clients.' * **Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:17 PM
7	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:19 PM
8	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapy For 5.29 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space v) It is critical that therapist are very experienced in face-to-face Gold Standard of therapy experience BEFORE online therapy is practiced. For minimum levels of Online practice to be achieved there needs to be robust training in the critical differences, between online & face-to-face practice with regard to risk management issues, GDPR, Technology issues etc. vi) specific training in the management of Suicide, Self-harm etc is mandatory.	11/26/2023 10:11 AM
9	In addition, the language and terminology used is not in keeping with the practice of psychotherapy. They are clients, not service users!	11/22/2023 6:34 PM
10	This is not always wholly possible and may leave therapist open to lawsuit	11/22/2023 2:05 PM
11	Good supervision provides huge support to the therapist in dealing with these issues	11/15/2023 10:53 PM
12	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:26 AM
13	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:11 PM
14	there is no guarantee that in each case every potential risk will be able to be identified. the	10/25/2023 8:14 PM

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training, skills and intention would be considered threshold.

15	Not only identify but actually providing intervention	10/25/2023 2:51 PM
16	It is not simply about referring on it is actually about working with these issues.	10/25/2023 2:51 PM
17	Psychotherapists also provide effective long-term therapy for such clients. It is not only about referring onwards.	10/22/2023 11:43 AM
18	Not strong enough. This does not make clear that the psychotherapist is equipped to provide primary treatment themselves and that the additional referral is to complement this. The psychotherapist needs to be able to assess risks, needs and strengths and also demonstrate competence in making complex judgements about ongoing work with high risk clients.	10/21/2023 6:39 PM
19	To suicide or not to suicide its a personal client`s decision. I cant to make it purpose, and I can`t to direct person to get an additional treatment without his wish (I find it valent intervention). I can suggest to get a treatment and extra sessions, or to recommend "Pieta House"	10/21/2023 5:45 PM
20	to demonstrate capability to utilise evidence based models for working with clients at potential risk.....	10/20/2023 9:12 PM
21	as in Q5	10/18/2023 11:06 AM
22	This should be the basics of training in Therapy	9/25/2023 10:45 AM
23	ditto above	9/13/2023 8:31 PM
24	insofar as is possible	9/5/2023 3:41 PM
25	I agree with all of this except for the make referrals part. In reality and practice I don't believe there are currently any mechanisms in place to make referrals. I believe referrals should be changed to advise of further supports / signpost to specific supports. It is up to the client to avail of this support if needed. I have never come across a situation where I have been able to directly refer a client to a service, it is generally all done by self-referral.	9/4/2023 9:46 PM

Q46 Standard 5.30 Be able to demonstrate knowledge of crisis intervention and prevention and be able to work with people in crisis for improved outcomes.

Answered: 157 Skipped: 271



ANSWER CHOICES	RESPONSES	
Consider threshold	85.99%	135
Do not consider threshold	10.19%	16
Partly threshold	3.82%	6
TOTAL		157

Q47 If you do not consider Standard 5.30 to be threshold or if you consider it to be partly threshold, please explain why

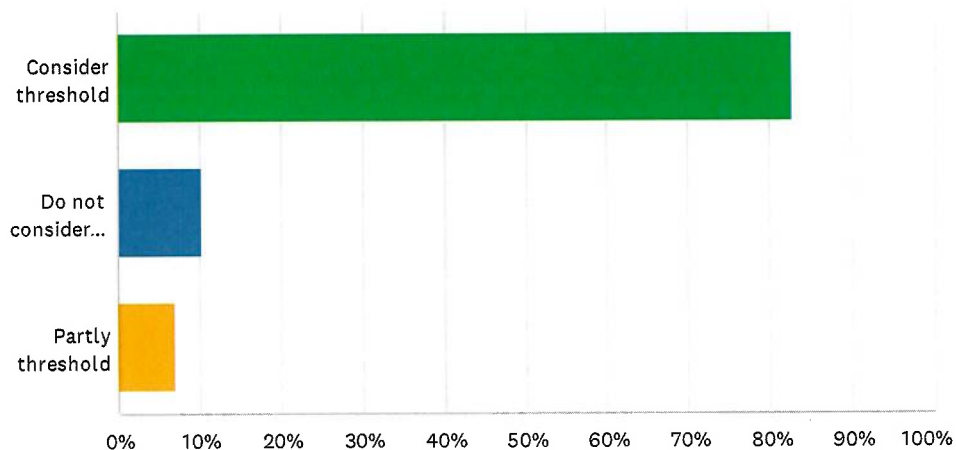
Answered: 19 Skipped: 409

#	RESPONSES	DATE
1	Training in models of longer term psychotherapy would not necessitate specific training in crisis intervention. Is CORU setting training criteria for a jack of all trades' state psychotherapist who can do a bit of all models of therapeutic but not be a master of any?	12/1/2023 4:30 PM
2	While it's important to be aware of crisis intervention and services available to any client. A therapist can only do so much. Supporting the client with mental health and skills is the most important, while also assisting in any reasonable way to help the client access other services if necessary.	11/29/2023 3:29 PM
3	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:20 PM
4	Supervision vital	11/28/2023 8:46 PM
5	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapy For 5.24 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space v) It is critical that therapist are very experienced in face-to-face Gold Standard of therapy experience BEFORE online therapy is practiced. For minimum levels of Online practice to be achieved there needs to be robust training in the critical differences, between online & face-to-face practice with regard to risk management issues, GDPR, Technology issues etc. vi) Crisis intervention training must be completed to do this work.	11/26/2023 10:19 AM
6	This would require 'stepping out' of the psychotherapeutic approach and applying local policies and recommended practices in crisis working. This I think needs stated.	11/24/2023 11:04 AM
7	There are areas of work that are crises intervention. Not all therapist will choose to work in this area. Perhaps wording Where relevant "be able to demonstrate" etc	11/23/2023 12:07 AM
8	This standard implies a onus on psychotherapists to keep the client alive at all costs. This potentially has legal implications for psychotherapists. Psychotherapists should utilise what ever means they can but ultimately if a client chooses to complete suicide that is their right and the psychotherapist should not be held responsible.	11/22/2023 6:35 PM
9	This is specialized work ,needing more than the threshold standard	11/22/2023 1:27 PM
10	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:27 AM
11	This is connected to some modalities and not others.	11/1/2023 4:53 PM
12	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:12 PM
13	again an aim for improved outcomes, not a guarantee	10/25/2023 8:16 PM
14	as stated in Q5	10/18/2023 11:06 AM
15	Psychotherapy and crisis intervention are not the same, it is good to know and be able to know of crisis interventions and preventions, but not necessary work with people with crisis.	10/17/2023 8:08 AM
16	Crisis intervention is not the same as psychotherapy There was no specific training given for crisis intervention in a 4 year degree that I attended. I took up extra CPD to inform myself of CI.	10/6/2023 12:51 PM
17	While it is necessary for therapists to recognise the need for crisis intervention, I don't believe it is necessary for all therapists to be able to deliver crisis intervention.	9/19/2023 6:12 AM
18	should be a higher standard undermines our profession	9/13/2023 8:31 PM

(Psychotherapists)
This is not the remit of all services, so the skill of identifying crisis and taking action might
be more appropriate

Q48 Standard 5.31 Have a critical awareness of the need for organisation and resource management for practice.

Answered: 157 Skipped: 271



ANSWER CHOICES	RESPONSES	
Consider threshold	82.80%	130
Do not consider threshold	10.19%	16
Partly threshold	7.01%	11
TOTAL		157

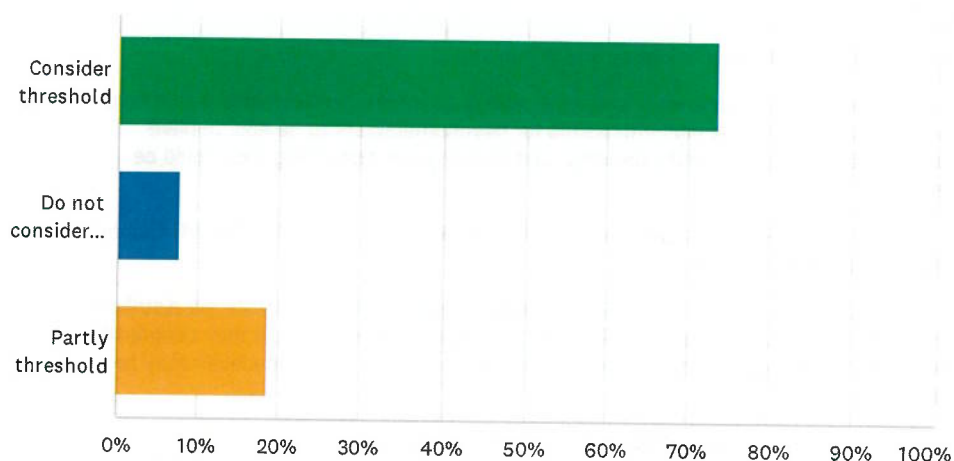
Q49 If you do not consider Standard 5.31 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 19 Skipped: 409

#	RESPONSES	DATE
1	This knowledge is built up over many years, knowing the right interventions and resources that any individual client may need.	11/30/2023 1:58 PM
2	Yes these are important and necessary for any profession but the question is too vague to give a straight answer.	11/29/2023 3:29 PM
3	Imperative for the therapist to recognise and be able to deal with both transference and counter transference through supervision.	11/29/2023 1:20 PM
4	Supervision vital	11/28/2023 8:46 PM
5	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapist. It is very important the external Independent Clinical Supervision is in place within agencies to insure that the overarching needs of members of the public are prioritised over the needs of the to promote culture transparency. For 5.31 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space v) It is critical that therapist are very experienced in face-to-face Gold Standard of therapy experience BEFORE online therapy is practiced. For minimum levels of Online practice to be achieved there needs to be robust training in the critical differences, between online & face-to-face practice with regard to risk management issues, GDPR, Technology issues etc.	11/26/2023 10:19 AM
6	The majority of therapists are self-employed or working in isolation. Where working within a charity or school organisation and resource management are not part of therapeutic practice. I think that this would be a different job title, and one that would exist within an organisation?	11/23/2023 12:07 AM
7	We consider that the type of practice aimed for should be made explicit. We suggest including "effective" and / or "efficient" as descriptions of practice in this standard.	11/22/2023 10:32 AM
8	Does this refer to personal organisational skills and ability to manage their own internal/ external resources to practice?	11/20/2023 3:25 PM
9	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:27 AM
10	The level of skill may vary here, depending on the therapist's background and need for organisations and resource management. Private practice may make these skills more essential than employment in a clinic not managed by therapist him/herself.	11/3/2023 1:46 PM
11	Needs clarification and relation to psychotherapeutic practice.	11/1/2023 4:53 PM
12	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:12 PM
13	Useful but not essential	10/24/2023 3:21 PM
14	I think understanding "how can I manage my resources" is anusless in a 39 hour work week. It's too much! Burnout will be guaranteed. I think that if you are in the business of regulating criteria, you need to regulate and the criteria of work shifts, especially in psychotherapy.	10/21/2023 5:54 PM
15	I do not believe this standard is clear in its intention	10/20/2023 9:13 PM
16	Most of the current placement practices are not set up to meet these types of SoP	10/5/2023 5:04 PM
17	should be higher standard	9/13/2023 8:31 PM
18	This is again something that needs to be supported within the companys leadership engagement with the practitioner. Overall its the clients interest that is the most important one, with awareness of the limitations set by the company.	9/7/2023 5:04 PM

Q50 Standard 5.32 Be able to demonstrate an understanding of the impact of pharmacological use and history on psychological functioning and recognise potential implications for service users.

Answered: 155 Skipped: 273



ANSWER CHOICES	RESPONSES	
Consider threshold	73.55%	114
Do not consider threshold	7.74%	12
Partly threshold	18.71%	29
TOTAL		155

Q51 If you do not consider Standard 5.32 to be threshold or if you consider it to be partly threshold, please explain why

Answered: 30 Skipped: 398

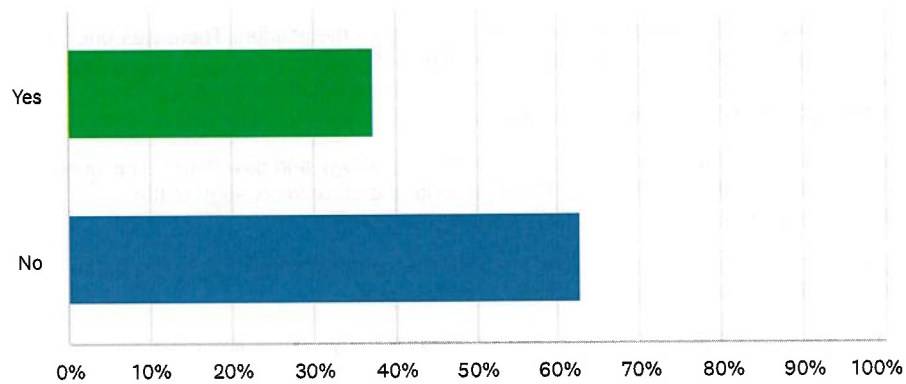
#	RESPONSES	DATE
1	Done in consultation with psychologists and psychiatrists	12/1/2023 1:08 PM
2	This is a vast area that is continually changing, and is a problem for clinicians in that field i.e. psychiatrists...it would be nigh impossible for psychotherapists to be able to have anything other than a general understanding, and certainly not something they could be responsible for .	12/1/2023 11:13 AM
3	This is an area that needs the support of a multidisciplinary team approach. The will support the psychotherapist in the skill.	12/1/2023 8:52 AM
4	As the pharmacological and the many different pharmacuticles that are availe are distributed by Medical Doctors this may be out of the remit oif psyxchpothepapist's as they continually change. However an understanding of how medication can be of benifit to clients may be a good idea	11/29/2023 5:33 PM
5	as with 5.28, the focus on psychological functioning does not align with humanistic approaches to psychotherapy and does not constitute safe practice on its own. 5.32 could read "Be able to demonstrate an understanding of the impact of pharmacological use and history on service user functioning and recognise potential implications for service users". The inclusion of additional factors (beyond the psychological) renders the practice safe.	11/29/2023 5:28 PM
6	Therapists need to have some understanding around this area and most do. But therapists are not psychiatrists.	11/29/2023 3:29 PM
7	only on a basics level	11/28/2023 3:57 PM
8	The students personal development & maturity is of particular relevance. ALL of the following are critical to a prospective student being a competent therapy For 5.31 to be achieved the following is required i) Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). ii) Have personally undergone a minimum of 250 hours of Psychotherapy. iii) An appropriately trained and qualified supervisor must have supervised their training. iv) The therapist must comply with GDPR guidance to insure that Therapy is a confidential space v) It is critical that therapist are very experienced in face-to-face Gold Standard of therapy experience BEFORE online therapy is practiced. vi) Some training in pharmacology sources of information is necessary for therapists to be informed in fulfilling the criteria of 5.32 to be achieved	11/26/2023 10:19 AM
9	Does this relate to illicit drug or prescription drug use? This would need greater clarity.	11/24/2023 11:04 AM
10	Perhaps this has changed, but when I trained there was nothing in the training regarding pharmacological use. I have been working for over 10 years and I have not felt the need to have any further knowledge to date. I have done some work myself to allow normalising of side effects for the clients and to inform our work together, depending on the pharmacological implications for them	11/23/2023 12:07 AM
11	I believe the suggested coru training levels would not give the therapist the required capacity	11/22/2023 7:13 PM
12	Psychotherapists are neither qualified pharmacists or medical practioners so no onus should be placed on them is this regard. It leaves them legally vulnerable.	11/22/2023 6:35 PM
13	As psychotherapists are not in the business of prescribing I believe this stand to be of lesser necessity as one to be achieved in training	11/22/2023 3:25 PM
14	I think one needs extensive training and self-reflection to achieve standard 5.21	11/14/2023 1:27 AM
15	Limitations and consultations are needed between therapist, client, GP and or Psychiatrist.	11/13/2023 5:47 PM
16	This would go toward psychiatry. While a threshold, an awareness, is necessary, full pharmaceutical knowledge should not be expected from a psychotherapist. Here, it is essential that health care providers work together as a network, such as the therapists, GPs and psychiatrists.	11/3/2023 1:46 PM

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17	ambiguous - 'impact of pharmacological use and history' (Psychotherapists)	11/1/2023 4:53 PM
18	This standard, similar with other standards is common to both counsellors and psychotherapists.	10/26/2023 8:12 PM
19	Implies need for more medical based knowledge	10/20/2023 2:29 PM
20	as stated in Q5	10/18/2023 11:06 AM
21	This is very broad, as different people respond differently to medication. There was one module given during a 4 year degree that included little information on pharmacology and abnormal psychology. Therefore I would imagine most therapists have a limited understanding of this unless they have undertaken specific trainings or personal interest.	10/6/2023 12:51 PM
22	this is specialty knowledge that is based on clinical psychology and psychiatry. The work as psychotherapist is purely aimed at internal functioning, therefore knowledge of the pharmacological use cannot be necessarily be assessed at all	10/3/2023 10:51 AM
23	Liaising with prescribing gp or psychiatrist to gain wider understanding of prescribed drugs and to check whether same conducive to/with talk therapies	9/18/2023 10:07 PM
24	Not all psychotherapists are or have been doctors or medically trained and therefore knowledge of pharmacological usage would have to be gained through contact with the clients medical doctor or other medical contacts.	9/15/2023 10:35 AM
25	This is not clear. Do you mean pharmacology as in prescribed psychiatric drugs? Or non-prescribed substances? Because if you are referring to prescribed drug treatments, then I would be concerned that this may give the impression that taking some psych drugs may become a barrier to counselling and reinforce that myth that counselling is only for the 'worried well'. Although I absolutely agree that there should be a requirement for therapists to be aware of the potential impacts of psychiatric drugs on the functioning of service users, including supporting individuals who are withdrawing from addictive drugs such as SSRIs and Benzodiazapines. So perhaps you might clarify what you mean by pharmacological use - for example could this include the impact of long term pain management medication? Or illicit drugs such a cocaine use? Or the sedating effects of 'antipsychotics'? Etc.	9/14/2023 1:37 PM
26	should be a higher standard	9/13/2023 8:31 PM
27	In so far as understanding but not more that would fall into the responsibility of professional with ability to prescribe.	9/9/2023 10:14 AM
28	To what level? Are you suggesting we fully understand everything about all of the numerous drugs and interactions that they are on?	9/8/2023 2:40 PM
29	If have prior training in a core profession yes, for example CBT but many courses would not cover this	9/7/2023 12:26 PM
30	In general, many medical general practitioners do not have an adequate understanding of the medication they prescribe. An overview of current trends is useful for therapists.	9/5/2023 3:46 PM

Q52 Do you consider there to be omissions?

Answered: 118 Skipped: 310



ANSWER CHOICES	RESPONSES	
Yes	37.29%	44
No	62.71%	74
TOTAL		118

Q53 Please fill in the boxes below if you consider there to be omissions from the document

Answered: 42 Skipped: 386

ANSWER CHOICES		RESPONSES
Domain		95.24% 40
Suggested Omission		92.86% 39
Proposed Wording to rectify omission		73.81% 31
Rationale for Comment		85.71% 36

#	DOMAIN	DATE
1	4	12/1/2023 4:50 PM
2	Mental illness	12/1/2023 2:44 PM
3	Criterion 1 level of entry to the register	12/1/2023 1:26 PM
4	Overall	12/1/2023 8:30 AM
5	Psychotherapy profession	12/1/2023 8:10 AM
6	5.1-5.8	12/1/2023 1:46 AM
7	3	11/30/2023 8:04 PM
8	Psychotherapy training	11/30/2023 1:21 PM
9	Proficiencies 5.1-5.8	11/30/2023 12:41 PM
10	Domain 5 — Professional Knowledge and Skills, which currently contains 'common standards' 5.1-5.8	11/30/2023 12:23 PM
11	Domain 5: Professional Knowledge and Skills	11/30/2023 12:15 AM
12	Training	11/28/2023 8:52 PM
13	Every domain	11/28/2023 6:39 PM
14	Personal therapy	11/28/2023 1:07 PM
15	Supervision	11/26/2023 6:11 PM
16	Admission standards to Training should be Level 9	11/26/2023 10:29 AM
17	The Standards of Proficiency are problematic as	11/23/2023 5:42 PM
18	Criterion 2	11/23/2023 12:26 AM
19	requirement for personal and group therapy	11/22/2023 3:29 PM
20	Personal Therapy	11/22/2023 2:10 PM
21	Appropriate Supervision	11/13/2023 5:56 PM
22	Training	11/8/2023 5:11 PM
23	Supervision attendance post qualification	11/8/2023 1:28 PM
24	All Domains	11/1/2023 5:00 PM
25	5	10/26/2023 8:14 PM
26	Education level	10/25/2023 5:11 PM
27	Professional Knowledge and Skills	10/25/2023 3:03 PM
28	Training	10/24/2023 3:30 PM

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29	Professional Knowledge and Skills	10/22/2023 12:31 PM
30	Professional Knowledge and Skills	10/21/2023 6:39 PM
31	personal therapy	10/21/2023 6:03 PM
32	5	10/18/2023 11:38 AM
33	5	10/11/2023 7:54 PM
34	Practice Placements	10/6/2023 1:13 PM
35	There are a host of evidence based psychotherapy variables missing from the sop. It's difficult to understand the rationale for the choice and how the extant literature was used to do this	10/5/2023 5:08 PM
36	personal therapy and personal development as foundation to practice psychotherapy	10/3/2023 10:58 AM
37	Professional knowledge and skills	9/15/2023 10:42 AM
38	Professional development	9/14/2023 1:44 PM
39	personal therapy	9/13/2023 8:31 PM
40	I want to know, what happens to the therapist that are working many years, with an honours degree... are we to be downgraded to counsellors.	9/5/2023 12:52 PM
#	SUGGESTED OMISSION	DATE
1	Be able to engage in and take responsibility for professional development	12/1/2023 4:50 PM
2	Diagnoses	12/1/2023 2:44 PM
3	the current standard proposed is too low	12/1/2023 1:26 PM
4	Not in line with the EAP Standards for Psychotherapist	12/1/2023 8:30 AM
5	Differentiation between psychotherapy and counselling	12/1/2023 8:10 AM
6	Lack of proficiencies related to the value, responsibility, utility and benefit to trainee and client to the trainee doing substantial personal therapy whilst training (and even throughout their career).	12/1/2023 1:46 AM
7	no requirement for clinical supervision	11/30/2023 8:04 PM
8	Absent is any requirement for personal psychotherapy	11/30/2023 1:21 PM
9	Proficiencies 5.1-5.8 should be available for feedback	11/30/2023 12:41 PM
10	We propose adding new proficiencies (in addition to amendments we proposed in Qs 4-51) from: a) psychologist draft proficiencies; b) some that are connected to self-awareness and personal development of the psychotherapist and how this impacts on clinical practice, and c) the complexity of the work in which the psychotherapist engages (profession-specific standards), and amend proficiencies 5.3, 5.6, and 5.7 (common standard proficiencies).*	11/30/2023 12:23 PM
11	The nature of Psychotherapy as a subtle practice of depth and duration that uses the psychotherapist-service user relationship to explore, gain insight into and heal the complex, individualized and often traumatic experiences of the whole person (service user)	11/30/2023 12:15 AM
12	Proficiency needs to be Level 9	11/28/2023 8:52 PM
13	Requirement for adequate personal work which is the foundation stone of professional competence	11/28/2023 6:39 PM
14	There is no requirement for personal therapy	11/28/2023 1:07 PM
15	Appropriate Supervision	11/26/2023 6:11 PM
16	Minimum entry requirements are inadequate	11/26/2023 10:29 AM
17	they are at a lower level than we currently operate and are linked to Level 8 rather than Level 9 standards. The wording of many of the Proficiencies are not in keeping with the practice of Psychotherapy.	11/23/2023 5:42 PM
18	Incorrect /Misunderstanding of the profession	11/23/2023 12:26 AM
19	Mandatory Personal Therapy during Training	11/22/2023 2:10 PM
20	Supervisor - specialized qualifications	11/13/2023 5:56 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

21	Personal Therapy needs to be a Mandatory Requirement	11/8/2023 5:11 PM
22	Ensure supervision post training remains in place . Iacp current ratio of 1/30 hours is an excellent one .	11/8/2023 1:28 PM
23	There is an absence of a specific appreciation of the nature of the work of psychotherapy here as it is practiced by clinicians in this field. The current wording is very much associated with psychiatric and clinical psychology models of practice, with which I am familiar. This is quite different from the specific work of psychotherapy, particularly when this work is of long-term duration.	11/1/2023 5:00 PM
24	We were not able to comment on standards of proficiency from 5.1 to 5.8 in this survey.	10/26/2023 8:14 PM
25	Masters level	10/25/2023 5:11 PM
26	These proficiencies are too low. They do not adequately reflect the level of work a psychotherapist does.	10/25/2023 3:03 PM
27	Personal therapy in training is essential for competence	10/24/2023 3:30 PM
28	In general these proficiencies, while relevant, are not strong enough to convey the work of the psychotherapist.	10/22/2023 12:31 PM
29	We believe that there are insufficient proficiencies that address the complexity of the work in which the psychotherapist engages, and the personal development of the psychotherapist and how this impacts on clinical practice. While standards 1 – 8 in Domain 5 are part of the 'common standards', we note that most are fine, but again we do not believe that these adequately express the higher level of competence that we believe is required. For example, standard 3, should be strengthened by the addition of 'and critically appraise', and it does not adequately cover the clinical governance (pre- and post-therapy assessment) that is required, or the learning about scientific enquiry that is accrued through completion of a research dissertation. Number 6, excludes professional skills, which are central to clinical practice also. Number 7 does not mandate the completion of a complex research dissertation and the critical understanding of ethics in research that is required.	10/21/2023 6:39 PM
30	to introduce the criteria of personal therapy (min of 150 hours) like necessity	10/21/2023 6:03 PM
31	Level 9 training instead of level 8	10/18/2023 11:38 AM
32	Personal Therapy	10/11/2023 10:51 PM
33	Cultural Humility and Multicultural responsiveness as a critical standard	10/11/2023 7:54 PM
34	Personal Therapy	10/6/2023 1:13 PM
35	[REDACTED] Evidence based counselling and psychotherapy for the 21st centry practitioner, Emerald binglely publications	10/5/2023 5:08 PM
36	personal therapy and personal development as foundation to practice psychotherapy must be mandatory, as it currently is established	10/3/2023 10:58 AM
37	No mention of personal therapyPersonal therapy	9/15/2023 10:42 AM
38	There appears to be no minimum ratio for client supervision hours	9/14/2023 1:44 PM
39	Grandparent clause	9/5/2023 12:52 PM
#	PROPOSED WORDING TO RECTIFY OMISSION	DATE
1	Be able to engage in and take responsibility for professional and personal development	12/1/2023 4:50 PM
2	A working knowledge of DSM/ICD diagnoses and their meanings.	12/1/2023 2:44 PM
3	The minimum level of qualification for entry to the register is Level 9 on the National Framework of Qualifications (NFQ).	12/1/2023 1:26 PM
4	Proof in line with the EAP Document	12/1/2023 8:30 AM
5	Legally different professions	12/1/2023 8:10 AM
6	absolute requirement for clinical supervision in agreed ratio to client hours depending on experience	11/30/2023 8:04 PM
7	Trainees shall be required to undertake a minimum of 250 hours of personal psychotherapy during their training	11/30/2023 1:21 PM
8	Clinical contexts, Practice-based evidence, Long term critical evaluations of a complex and nuanced psychotherapeutic relationship	11/30/2023 12:41 PM

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9	Proposed wording to rectify omission — Proposed New Standards of Proficiency Domain 5 — Professional Knowledge and Skills: 1. Be able to recognise the importance of maintaining professional and ethical boundaries within the practitioner-service user relationship. 2. Demonstrate a deep sensitivity to the impact of one's own history and family of origin on recurring patterns of behaviour, interpersonal relationships and of the process of change in oneself and in others, leading to a developed capacity to understand connections between their own family experiences and their therapeutic work. 3. Assess critically, and in light of their own reflective processes and in response to feedback from others including clinical supervisors, make plans to improve their own knowledge, skills and competencies in working at the forefront of the field of psychotherapy. 4. Reflect critically on the personal process of self and client, professional practice matters and therapeutic use of self within psychotherapeutic relationships, including relationships with complex and vulnerable clients. 5. Demonstrate a commitment to engage in CPD to maintain and enhance proficiency in knowledge, skills and competence in the psychotherapy field, including novel and emerging techniques and theories. 6. Use appropriate psychotherapy frameworks and advanced clinical judgement to refer onwards, or formulate and implement personalised plans for psychotherapeutic interventions, informed by specialist knowledge, including responding to new and novel circumstances. 7. Advanced skills in managing a psychotherapy practice within contexts of ambiguity, uncertainty and unfamiliarity, including effectively, e.g., setting up practice, managing referrals, intake procedures, clinical governance, record keeping, storage of files, report writing, and working within relevant guidelines. 8. Apply advanced reflection skills to complex matters, act effectively and autonomously in managing complex cases, and make appropriate use of interpersonal and organisational resources for personal and professional support.* Proposed Amendments to Common Standards of Proficiency: Domain 5 — Professional Knowledge and Skills: 5.3. Know, understand and critically appraise the principles and applications of scientific enquiry, including the evaluation of treatment/intervention efficacy, the research process and evidence-informed practice. 5.6. Demonstrate safe and effective implementation of practical, technical and clinical, and professional skills. 5.7. Demonstrate ability to participate in, and conduct or lead clinical, academic or practice-based research and have a critical understanding of ethics in research.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:23 PM
10	provide an agreed, meaningful and inclusive definition of psychotherapy as underpinning for the threshold proficiencies required of a psychotherapistrequired	11/30/2023 12:15 AM
11	Level 9 required with diverse prior learning experience recognised in exceptional cases.	11/28/2023 8:52 PM
12	Practitioners should not only recognize the value of personal therapy but should prove a history of having engaged in a threshold amount (200 hours) of therapy themselves	11/28/2023 1:07 PM
13	Seven years of training, ending in a postgraduate qualification (level 9 in Ireland).	11/26/2023 10:29 AM
14	Direct Supervision - There should be no direct supervision	11/23/2023 12:26 AM
15	Therapists should have to complete a minimum of 120 hours personal therapy and 250 hours group therapy and personal development during training.	11/22/2023 2:10 PM
16	Supervisor monitors ethics as the gatekeeper of the profession.	11/13/2023 5:56 PM
17	100 hours of Personal Therapy need to be undertaken during 4 year training programme.	11/8/2023 5:11 PM
18	Provide on site training to supervisors in agencies who may be in position to provide placement for students . The agency supervisor own training and experience in supervision needs to be clearly laid out and monitored .	11/8/2023 1:28 PM
19	This should be radically reconsidered.	11/1/2023 5:00 PM
20	Facilitate the availability of standards and proficiencies from 5.1 to 5.8.	10/26/2023 8:14 PM
21	Trainee therapists must do their own therapeutic work throughout their training	10/24/2023 3:30 PM
22	Consider strengthening existing proficiencies and adding many more that will reflect the complex work of the psychotherapist with clients in significant distress and in relation to work in ambiguous contexts. Developmentally appropriate practice needs to be referenced, as does the therapeutic use of self that is central in relationship based psychotherapy. The advanced nature of the clinical decisions that psychotherapists make regularly is not fully presented.	10/22/2023 12:31 PM
23	New proficiencies: Be able to evaluate the effect of their life experiences, own	10/21/2023 6:39 PM

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characteristics, values and practices on interactions with service users and be able to critically reflect on this to improve practice. Be able to utilise reflective practice and self-awareness within the practitioner – service user relationship. Be able to recognise the importance of maintaining professional and ethical boundaries within the practitioner – service user relationship. Demonstrate a deep sensitivity to the impact of one's own history and family of origin on recurring patterns of behaviour, interpersonal relationships and of the process of change in oneself and in others leading to a developed capacity to understand connections between their own family experiences and their therapeutic work. Assess critically and, in light of their own reflective processes and in response to feedback from others including clinical supervisors, make plans to improve, their own knowledge, skills and competencies in working at the forefront of the field of psychotherapy both. Reflect critically on the personal process of self and client, professional practice matters and therapeutic use of self within psychotherapeutic relationships including relationships with complex and vulnerable clients. Demonstrate a commitment to engage in CPD to maintain and enhance proficiency in knowledge, skills and competence in the psychotherapy field, including novel and emerging techniques and theories. Use appropriate psychotherapy frameworks and advanced clinical judgement to refer onwards, or formulate and implement personalised plans for psychotherapeutic interventions, informed by specialist knowledge, including responding to new and novel circumstances. Advanced skills in managing a psychotherapy practice within contexts of ambiguity, uncertainty, and unfamiliarity, including effectively (e.g.) setting up practice, managing referrals, intake procedures, clinical governance, record keeping, storage of files, report writing, working within relevant guidelines. Apply advanced reflection skills to complex matter, act effectively and autonomously in managing complex cases, and make appropriate use of interpersonal and organisational resources for personal and professional support. Amended Proficiencies: 3. Know, understand and critically appraise the principles and applications of scientific enquiry, including the evaluation of treatment/intervention efficacy, the research process and evidence-informed practice 6. Demonstrate safe and effective implementation of practical, technical and clinical, and professional skills 7. Demonstrate ability to participate in, and conduct or lead clinical, academic or practice-based research and have a critical understanding of ethics in research.

24	The minimum level of qualification for entry to the register is Level 9	10/18/2023 11:38 AM
25	Minimum of 100 hours of personal therapy to be included in training	10/11/2023 10:51 PM
26	please consider the below	10/11/2023 7:54 PM
27	Personal Therapy	10/6/2023 1:13 PM
28	mandatory personal therapy in education for psychotherapy	10/3/2023 10:58 AM
29	Therapist must be able to reflect one and put aside their own triggers/bias within the therapeutic relationship	9/15/2023 10:42 AM
30	I suggest looking at the minimum supervision to client hour ratio for other European and UK psychotherapy bodies such as the EAP and UKCP	9/14/2023 1:44 PM
31	It is an essential requirement for student to do 4 years of personal therapy	9/13/2023 8:31 PM
#	RATIONALE FOR COMMENT	DATE
1	see our document	12/1/2023 5:00 PM
2	in the practice of psychotherapy the responsibility for management personal process is a proficiency criteria that is imperative to safety of client and practitioner in the therapeutic relationship. Whereas CORU is does not see fit to require personal therapy in training criteria, the ongoing safe practice of psychotherapy will frequently require monitoring and supervision of the fine lines of personal and professional development within the supervision relationship and it would improve the draft to nuance accordingly. This may be implicit in 4.4 but would benefit from being made more explicit as a statement of Professional and Personal Development.	12/1/2023 4:50 PM
3	To deal with clients with mental health diagnoses appropriately and recognise where referral for treatment or assessment might be useful.	12/1/2023 2:44 PM
4	To protect the public and to maintain standards of training in the profession	12/1/2023 1:26 PM
5	To maintain highest standards for the practice of psychotherapy in Ireland and for the protection of the public.	12/1/2023 8:30 AM
6	Reality of different professions	12/1/2023 8:10 AM
7	clinical supervision is key to the work we do. It is an essential tool for work e.g to discuss	11/30/2023 8:04 PM

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clinical approach.

8	As the therapeutic relationship is the most important core element of their practice, the process of adequate and deep engagement with personal unconscious dynamics which can affect this relationship is crucial.	11/30/2023 1:21 PM
9	The language of 5.1-5.8 is medical, intervention style, e.g. 'scientific enquiry' intervention efficacy"	11/30/2023 12:41 PM
10	To more accurately reflect the actual practice of the psychotherapist.*	11/30/2023 12:23 PM
11	this omission pervades many of the domain 5 proficiencies which, on the whole, fail to present psychotherapy as a subtle practice of depth and duration that uses the psychotherapist-service user relationship to explore, gain insight into and heal the complex, individualized and often traumatic experiences of the whole person (service user). In failing to delineate the depth and complexity of psychotherapy practice the proficiencies in domain 5 do not, for the most part, constitute safe practice.	11/30/2023 12:15 AM
12	Proposed Level 8 requirement lower than current standards	11/28/2023 8:52 PM
13	It is not really possible in good conscience to engage as a therapist without having undergone therapy oneself.	11/28/2023 1:07 PM
14	It is essential that a Psychotherapist be supervised appropriately by a supervisor who is appropriately trained and registered.	11/26/2023 6:11 PM
15	The students personal development & level of maturity is of particular relevance. a level 8 graduation is inconsistent with seminal theories of Human Development .	11/26/2023 10:29 AM
16	When a client attends counselling they are usually quite vulnerable. They require a space which allows them to feel safe, non-judged. To have another person in the room, in any way directly observing them, would impact the therapeutic alliance. It would not be safe for the client.	11/23/2023 12:26 AM
17	I do not believe there is sufficient underlining of the need for psychotherapist in training to have gone through their own therapy in order to meet the needs fully of their clients.	11/22/2023 3:29 PM
18	This is essential to recognising own personal triggers and identify transference and counter transference in the therapy space	11/22/2023 2:10 PM
19	No specific qualifications given to the clinical supervisor	11/13/2023 5:56 PM
20	It should not be left up to the discretion individual training institutions.	11/8/2023 5:11 PM
21	The risk that the criteria for the profession lead to a narrowing of the potential for professionals in this field to contribute something distinctive. The risk here is that this profession is squeezed into the shape of a 'mental health profession' and away from the fuller role that is currently plays in the lives of our clients. Our clients choose psychotherapy often after many years of other kinds of work. We do not frame our clients as service users, but as people who are seeking change, understanding, etc., in their lives. It is also important here that the wording recognises that most psychotherapists work privately and it seems likely that this will continue to be the case into the future, due to the lack of funding available for psychotherapy specifically (with funding available for brief interventions). It is important that this reality is attended to in the wording of regulations.	11/1/2023 5:00 PM
22	To allow for full completion of the survey.	10/26/2023 8:14 PM
23	Some of these proficiencies are not at the appropriate level, they are too low and a range of extremely important competencies are not included.	10/25/2023 3:03 PM
24	An essential distinguishing factor between psychotherapy and psychiatry and psychology is the transformative importance of Presence and Relationship. Doing one's own therapeutic work is vital for the dynamic laboratory of the therapeutic relationship to function. The therapist needs to be a non- reactive mirror, an attuned real time monitor, a nervous system monitor and clear about arising transference and counter transference. The therapist needs to have resolved any personal trauma, conditioning or character strategies that might compromise this dynamic working presence. It is a fundamental distinction from the other modalities that requires deep therapeutic work.	10/24/2023 3:30 PM
25	To highlight the need for the complexity in the work to be portrayed and therefore assessed in the student prior to graduation. This will strengthen public safety.	10/22/2023 12:31 PM
26	■■■■ consider that the Professional Knowledge and Skills, presented in the Draft Standards of Proficiency for Psychotherapists, cause concern as, even while most are part of the current practice of psychotherapists, some are not at the appropriate level needed (being	10/21/2023 6:39 PM

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too low), and a number of highly important competencies are not included. As none of the proficiencies proposed reach level 9 requirements on the NFQ we wish to point out that there is a gap in addressing the capacity necessary to work with complex clients, and that the proficiencies as currently presented do not adequately describe the knowledge, skills and competence actually required for safe, ethical, and competent practice with vulnerable clients. There are gaps in terms of mentioning developmentally appropriate work; utilising advanced clinical judgement informed by specialist knowledge; and working within ambiguous contexts. In addition, there are serious gaps in terms of assessing the personal development of the student; the capacity to recognise and evaluate the effects of own life experiences on therapeutic relationships; and making therapeutic use of self at an advanced level. One more significant gap is in regard to clinical supervision (not just 'supervision'), and the capacity to engage fully, frequently, and reflectively in this. Overall [REDACTED] does not believe that there is sufficient regard given to the expertise required of a psychotherapist and the safety needs of the client.

27	With the help of personal therapy, the therapist understands himself better, recognizes his own characteristics, learns to recognize his feelings, understand his own and others' boundaries, notices his "transferences/countertransferences" to clients and people. This helps to maintain professionalism and makes it possible to implement all the points you described above related to the personality of the therapist and his professionalism. It is not possible to provide quality therapeutic services without the client being involved in this process.	10/21/2023 6:03 PM
28	The standards in domain 5 in and of themselves are appropriate and required, however I do not believe level 8 training meets the level of skill, knowledge and understanding that is required of a psychotherapist. Furthermore level 8 graduates will not meet international standards for practice. Therefore the minimum level of qualification should be level 9.	10/18/2023 11:38 AM
29	In order to avoid the common pitfalls that occur in the counter transference and to have as much self awareness as possible I believe personal therapy to be absolutely necessary for any psychotherapist. To have a full understanding of the vulnerability, honesty and difficulty involved in sitting in the clients chair can only be fully assimilated by experience of that role.	10/11/2023 10:51 PM
30	On the Criteria for Education and Training Programmes, I would like to highlight the importance that CORU review both profession specific criteria urgently to ensure it encompasses meaningful EDI outcomes from training courses providing the counselors and psychotherapists of the future. It is my position based on clinical experience and noting demographic and migration trends impacting Ireland position that this is not currently the case with respect to core training in Ireland and there is evidence both locally and internationally this is leading to non- inclusive, oppressive training & practice in some instances. I would point to the work of the Coalition for Inclusion and Anti-Oppressive Practice in the UK in recent years as well as the requirements for licensure in the USA as relevant international examples in this regard. We also point to the opportunity presented by regulation to provide practitioners with core training that aligns with the HSE's second Intercultural Health Strategy. These examples all align firmly around CORU's own standards of proficiency with domain 2 stating graduates, Be able to modify and adapt communication methods and styles, including verbal and non-verbal methods to suit the individual service users considering issues of language, culture, beliefs and health and/or social care needs	10/11/2023 7:54 PM
31	Therapists in training need personal therapy while in training, it reduces the risk of clinicians being triggered or re-traumatized themselves in some cases when listening to the stories of others during clinical placement. It acts as a further support for students in training.	10/6/2023 1:13 PM
32	this is an integral part for psychotherapy, internationally established, the quality of work must be upheld, not diminished	10/3/2023 10:58 AM
33	Without personal therapy a psychotherapist is just learning from a book of training and not engaging with the subject itself and therefore may do more harm than good, especially if they are triggered by a clients issue. There would be no point in asking a psychotherapist to engage with a client that has been sexually abused if they themselves have been abused and not dealt with it emotionally and worked through it.	9/15/2023 10:42 AM
34	To ensure consistency with the high standards for psychotherapy across Europe	9/14/2023 1:44 PM
35	So client will know what it is like to be in a client's shoes and also work on their own issues	9/13/2023 8:31 PM
36	I have been working for over 17 years seeing clients and over 3 years seeing supervisees. I have an honours degree, I have never had any issues, up until lately when a college didn't recognise my qualifications, as I didn't have a masters.	9/5/2023 12:52 PM

Q54 Please fill in the boxes below if you consider there to be omissions from the document

Answered: 25 Skipped: 403

ANSWER CHOICES		RESPONSES	
Domain		96.00%	24
Suggested Omission		88.00%	22
Proposed Wording to rectify omission		76.00%	19
Rationale for Comment		76.00%	19

#	DOMAIN	DATE
1	Overall qualification for Psychotherapy	12/1/2023 8:30 AM
2	2	12/1/2023 1:46 AM
3	4	11/30/2023 8:04 PM
4	Supervision	11/30/2023 1:21 PM
5	Domain 2 — Communication, Collaborative Practice and Teamworking	11/30/2023 12:23 PM
6	Domain 5: Professional Knowledge and Skills	11/30/2023 12:15 AM
7	Clinical Supervision	11/28/2023 1:07 PM
8	Research	11/26/2023 6:11 PM
9	Domains 1 to 5 in full	11/26/2023 10:29 AM
10	All	11/23/2023 12:26 AM
11	Supervision	11/22/2023 3:29 PM
12	Clinical Supervision	11/22/2023 2:10 PM
13	Supervision	11/13/2023 5:56 PM
14	Training	11/8/2023 5:11 PM
15	Personal Therapy	10/25/2023 5:11 PM
16	Professional Development	10/25/2023 3:03 PM
17	Professional Knowledge and Skills	10/22/2023 12:31 PM
18	Communication, Collaborative Practice and Teamworking	10/21/2023 6:39 PM
19	5	10/18/2023 11:38 AM
20	Communication Collaborative Practice and Team Working	10/6/2023 1:13 PM
21	More focus on personal development and its link to therapy with regard to building awareness of own feelings and impact on therapy	10/5/2023 5:08 PM
22	mandatory supervision	10/3/2023 10:58 AM
23	Criterion 1: Level of qualification for entry to the register	9/14/2023 1:44 PM
24	Threshold should be higher than Level 8 standard to recognise the value of the profession	9/13/2023 8:31 PM

#	SUGGESTED OMISSION	DATE
1	A level 9 rather than a Level 8 qualification	12/1/2023 8:30 AM
2	Developmental stages in a child/adolescent/adult and those whose progress through these stages of development/maturation is atypical.	12/1/2023 1:46 AM
3	No requirement for personal therapy to be on register	11/30/2023 8:04 PM

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4	Continuity and regularity of CLINICAL supervision	11/30/2023 1:21 PM
5	Insufficient references to developmental considerations necessary (both age and stage of development) when engaging with children, adolescents and other vulnerable clients. Also, more is needed regarding inter-agency and multidisciplinary team work.*	11/30/2023 12:23 PM
6	the role that reflexive awareness, gained through personal therapy or other forms of personal therapeutic experience, plays in ensuring that unconscious processes, biases, avoidances and other psychological processes of the therapist don't impact negatively and unsafely on vulnerable clients	11/30/2023 12:15 AM
7	There should be a threshold amount of clinical supervision required in order to practice	11/28/2023 1:07 PM
8	Research Methodologies	11/26/2023 6:11 PM
9	The students personal development & level of maturity is of particular relevance. a level 8 graduation is inconsistent with seminal theories of Human Development .	11/26/2023 10:29 AM
10	A copy and paste seems to have been done which shows a lack of understanding of the professions of Counselling and Psychotherapy	11/23/2023 12:26 AM
11	Mandatory Clinical Supervision	11/22/2023 2:10 PM
12	The necessity of supervision for the therapist to ensure client safety and care	11/13/2023 5:56 PM
13	External Clinical Supervision must be Mandatory during training.	11/8/2023 5:11 PM
14	Personal Therapy Required	10/25/2023 5:11 PM
15	This is particularly concerning as it does not reference and acknowledge the crucial importance of a psychotherapist's engagement in clinical supervision or personal psychotherapy. Appropriate ratios also need to be listed.	10/25/2023 3:03 PM
16	Proficiencies that reflect the outcomes of engagement in personal therapy	10/22/2023 12:31 PM
17	Insufficient references to developmental considerations necessary (both age and stage of development) when engaging with children, adolescents and other vulnerable clients. Also more needed regarding inter-agency and multidisciplinary team work.	10/21/2023 6:39 PM
18	No personal therapy during training	10/18/2023 11:38 AM
19	Be able to communicate diagnosis/assessment and/or treatment/management options in a way that can be understood by the service user	10/6/2023 1:13 PM
20	mandatory supervision	10/3/2023 10:58 AM
21	I believe every other psychotherapy body in Europe has a minimum level of expected engagement in personal therapy hours for training and entry onto a professional register, for example the UKCP requires 160 hours of personal therapy across training. This surely needs to be reflected in CORU policy standards in order that we don't end up with trainees dodging their own inner and personal work as this will have a hugely detrimental effect on their work with clients and the integrity of the profession.	9/14/2023 1:44 PM
22	should be a higher standard recognised	9/13/2023 8:31 PM
#	PROPOSED WORDING TO RECTIFY OMISSION	DATE
1	To include experiential self learning and group work, hours of supervision, knowledge, skills, experience and qualifications of the Supervisor, supervision/client hours, and supervision to be provided from the training school (not to include this, excludes a whole area of practice knowledge within the training programmes)	12/1/2023 8:30 AM
2	Absolute requirement for personal therapy to agreed hours to be on the register	11/30/2023 8:04 PM
3	Continuous CLINICAL supervision of the trainee at least weekly during training practice including the period in a mental health placement. The supervisor should be of the same modality in which the student is training.	11/30/2023 1:21 PM
4	Proficiency 2.2 suggested amendment: Be able to modify and adapt communication methods and styles, including verbal and non-verbal methods to suit the individual service users considering issues of language, age, developmental stage, culture, beliefs and health and/or social care needs.* Proficiency 2.13 suggested amendment: Understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team, including inter-agency and multidisciplinary teams with other professionals to enhance therapeutic outcomes.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential	11/30/2023 12:23 PM

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solutions but do not as yet represent the agreed position of the profession.

5	through reflexive and engaged awareness of their own psychological process gained through personal therapy or other forms of psychotherapeutic experience, psychotherapists are able to monitor their own contribution to the therapeutic relationship ensuring that it is a safe, reparative and trustworthy experience for the service user.	11/30/2023 12:15 AM
6	Practitioners should not only recognize the value of clinical supervision but should prove a history of having engaged in a threshold amount of supervision themselves	11/28/2023 1:07 PM
7	Psychotherapists should engage in clinical research and have appropriate clinical research supervision to add to research findings and dissemination	11/26/2023 6:11 PM
8	· Seven years of training, ending in a postgraduate qualification (level 9 in Ireland).	11/26/2023 10:29 AM
9	Replace the word service user with Client	11/23/2023 12:26 AM
10	Therapists must partake in minimum monthly clinical supervision with a at least 1 supervision hours to each 24 hours clinical work	11/22/2023 2:10 PM
11	Supervision to ensure ethical client care and ongoing professional standards.	11/13/2023 5:56 PM
12	Appropriate ratio of client hours to External Clinical Supervision hours	11/8/2023 5:11 PM
13	Mandatory engagement in clinical supervision and personal psychotherapy needs to be added	10/25/2023 3:03 PM
14	Additional proficiencies that communicate the capacity to work in relationship with reference to the personal development and self-awareness of the psychotherapist. Some from the Psychologist draft criteria and some totally new ones required.	10/22/2023 12:31 PM
15	Proficiency 2 suggested amendment: Be able to modify and adapt communication methods and styles, including verbal and non-verbal methods to suit the individual service users considering issues of language, age, developmental stage, culture, beliefs and health and/or social care needs. Proficiency 13 suggested amendment: Understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team, including inter-agency and multidisciplinary teams with other professionals to enhance therapeutic outcomes.	10/21/2023 6:39 PM
16	set number of hours personal therapy to be completed during training.	10/18/2023 11:38 AM
17	Be able to work in a collaborative manner with the client, be attuned to the client and demonstrate appropriate clinical interventions	10/6/2023 1:13 PM
18	regular supervision is obligatory with a trained supervisor in defined intervals	10/3/2023 10:58 AM
19	Could also go elsewhere in the standards but there surely has to be a minimum expectation for personal therapy during training in order to ensure and maintain high standards	9/14/2023 1:44 PM
#	RATIONALE FOR COMMENT	DATE
1	see our document	12/1/2023 5:00 PM
2	To support the Psychotherapist in training to work at a deeper level in order to be able to do so safely with their client.	12/1/2023 8:30 AM
3	so your own issues are dealt with, no triggering, understanding of what it is to be in therapy	11/30/2023 8:04 PM
4	It is not clear if the placement supervisor is a line manager or supervisor of clinical work. This distinction is important. It is not clear whether the on-site supervisor is a psychotherapist of the same modality in which the student is training; opening the possibility that the student would be confused--e.g. psychoanalytic or cognitive training?	11/30/2023 1:21 PM
5	To more accurately reflect the actual practice of the psychotherapist.*	11/30/2023 12:23 PM
6	The constructive and often reparative use of the therapeutic relationship is a distinctive aspect of psychotherapy practice. Service users frequently have adverse, complex experiences of relationships and often have low levels of interpersonal trust. In order for the therapeutic relationship to be helpful for the service user relational challenges have to be carefully navigated by the therapist. This requires high levels of self knowledge, particularly about unconscious biases, triggers, avoidances and thought patterns. The therapeutic relationship can only be safely entered into, managed and developed where the psychotherapist's own processes are known in depth. Personal therapy or other forms of	11/30/2023 12:15 AM

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(Psychotherapists)
psychotherapeutic experience is an established, robustly researched requirement of psychotherapy practice with few dissenters.

7	Crucial for the safety of clients	11/28/2023 1:07 PM
8	Research ability should be an essential competent of Psychotherapy training	11/26/2023 6:11 PM
9	The students personal development & level of maturity is of particular relevance. a level 8 graduation is inconsistnat with seminal theories of Human Development .	11/26/2023 10:29 AM
10	Many Counsellors and Psychotherapists work one to one with clients in isolation - not within a service or organisation.	11/23/2023 12:26 AM
11	Essential to provide ethical therapy	11/22/2023 2:10 PM
12	Client care and therapist care with ongoing safeguarding, and support for the therapist..	11/13/2023 5:56 PM
13	It should not be left up to the discretion of individual training institutions.	11/8/2023 5:11 PM
14	Concern for the safety of clients and psychotherapists	10/25/2023 3:03 PM
15	To underpin the need for personal psychotherapeutic experience.	10/22/2023 12:31 PM
16	To more accurately reflect the actual practice of the psychotherapist.	10/21/2023 6:39 PM
17	Personal therapy is an essential component in the personal development required to work therapeutically with clients in a safe and effective manner.	10/18/2023 11:38 AM
18	Therapists are not trained to diagnose therefore the word diagnosis does not reflect the work. Some of the language in the document reflects the work of a psychologist. Although some therapists use clinical tools, not all do. Assessment is a key part of a therapists job, but its rather a gathering of information to have a holistic understanding of the individual rather than looking for a label to diagnose.	10/6/2023 1:13 PM
19	supervision with trained supervisors are standard now, the quality of service must be upheld	10/3/2023 10:58 AM

Q55 Please fill in the boxes below if you consider there to be omissions from the document

Answered: 17 Skipped: 411

ANSWER CHOICES	RESPONSES
Domain	94.12% 16
Suggested Omission	82.35% 14
Proposed Wording to rectify omission	52.94% 9
Rationale for Comment	70.59% 12

#	DOMAIN	DATE
1	Clinical Supervision	12/1/2023 8:30 AM
2	4	12/1/2023 1:46 AM
3	Appropriate boundaries around the therapeutic process	11/30/2023 1:21 PM
4	Domain 4 — Professional Development	11/30/2023 12:23 PM
5	Domain 5: Professional Knowledge and Skills	11/30/2023 12:15 AM
6	Education and Training	11/26/2023 6:11 PM
7	Domains 1 to 5 in full	11/26/2023 10:29 AM
8	Standards of Proficiency	11/23/2023 12:26 AM
9	Minimum Qualification	11/22/2023 2:10 PM
10	supervision	10/25/2023 5:11 PM
11	Communication, Collaborative, Practice and Teamworking	10/25/2023 3:03 PM
12	All Domains	10/22/2023 12:31 PM
13	Professional Development	10/21/2023 6:39 PM
14	the issue of assessments is insufficiently defined	10/3/2023 10:58 AM
15	Why not cross reference with the European Certificate of Psychotherapy standards which sets the bar across Europe for psychotherapy?	9/14/2023 1:44 PM
16	Clinical supervision	9/13/2023 8:31 PM

#	SUGGESTED OMISSION	DATE
1	Clinical supervision by a clinical supervisor, in appropriate ratios, is fundamental to learning and safety for clients and therapists. So too is personal therapy by the therapist (in training).	12/1/2023 1:46 AM
2	Delete observation of client sessions for trainee psychotherapists	11/30/2023 1:21 PM
3	The whole Professional Development proficiencies section is weakened in that it does not address the central and critical role of the psychotherapist's engagement in clinical supervision, at appropriate ratios, both during and after training. Neither does it consider the central role that engagement in personal psychotherapeutic experience plays in the professional development of the psychotherapist.*	11/30/2023 12:23 PM
4	Psychotherapy proficiencies and attributes are at level 9 on the NFQ due to the need for complex, individualised (often novel) formulations of psychotherapeutic encounter that are required in order to meet the needs of service users who themselves may have complex trauma, combined with challenging life histories and multiple problems.	11/30/2023 12:15 AM
5	Level 9 for Psychotherapists	11/26/2023 6:11 PM
6	· Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). · Have personally undergone a minimum of 250 hours of Psychotherapy. · An appropriately trained	11/26/2023 10:29 AM

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and qualified supervisor must have supervised their training. In contrast, under the new CORU proposals, Psychotherapists would be required to only have a three- or four-year primary degree. Personal participation in therapy would not be a required part of their training, nor would their training need to be supervised by a supervisor who is appropriately trained and qualified.

7	Seems to be a copy and paste form a different profession	11/23/2023 12:26 AM
8	Therapists should have a minimum level 9 QQI qualification	11/22/2023 2:10 PM
9	Ratio of hours per client hour	10/25/2023 5:11 PM
10	Lack of refernce to developmentally appropriate practice - this stage and age of development. More needs to be added here. More needs to be added in relation to multidisciplinary team work too.	10/25/2023 3:03 PM
11	References to active engagement in Clinical Supervision	10/22/2023 12:31 PM
12	This whole section is weakened in that it does not address the central and critical role of the psychotherapist's engagement in clinical supervision, at appropriate ratios, both during and after training. Neither does it consider the central role that engagement in personal psychotherapeutic experience plays in the professional development of the psychotherapist.	10/21/2023 6:39 PM
13	define assessment level training and differentiate from assessments made by psychologists and psychiatrists	10/3/2023 10:58 AM
14	I feel there should be more than minimal clinical supervision to safeguard clients and students	9/13/2023 8:31 PM

#	PROPOSED WORDING TO RECTIFY OMISSION	DATE
1	Explicit details for the number of supervision hours and the qualifications and accreditation of the Supervisor	12/1/2023 8:30 AM
2	We propose that at least 2 more proficiencies be added to ensure the continued mandatory engagement in clinical supervision and personal psychotherapeutic experience that is currently part of the psychotherapy profession in Ireland, and throughout Europe and is associated with safe, ethical, and professional practice.* *Note: These are potential revisions to CORU Draft Proficiencies. These are included to demonstrate some potential solutions but do not as yet represent the agreed position of the profession.	11/30/2023 12:23 PM
3	The threshold level of safe psychotherapy practice is at level 9 on the NFQ.	11/30/2023 12:15 AM
4	Psychotherapists should be educated to Level 9 to keep Ireland in line with Europe and the UK	11/26/2023 6:11 PM
5	Counsellors and Psychotherapists do not diagnose. We do not assess. There are a variety of guides which suggest we do.	11/23/2023 12:26 AM
6	Minimum QQI Level 9 qualification	11/22/2023 2:10 PM
7	Additions needed to all ensure that active engagement in clinical supervision remains core in psychotherapy training and that the clinical supervisor has a direct role in screening referrals to protect client safety and student development.	10/22/2023 12:31 PM
8	We propose that at least 2 more proficiencies be added to ensure the continued mandatory engagement in clinical supervision and personal psychotherapeutic experience that is currently part of the psychotherapy profession in Ireland and throughout Europe and is associated with safe, ethical, and professional practice.	10/21/2023 6:39 PM
9	assessments made by clinical psychologists or psychiatrists are followed as basis to be considered in the work with the service user	10/3/2023 10:58 AM

#	RATIONALE FOR COMMENT	DATE
1	see document	12/1/2023 5:00 PM
2	Supporting safe psychotherapy practice for the protection of the public	12/1/2023 8:30 AM
3	Observation of sessions: while limited AUDIO observation is perhaps allowable for beginning COUNSELLORS working solely with external life stresses or crises, the presence of a third party in the therapy room is an intrusion into the therapeutic relationship and will	11/30/2023 1:21 PM

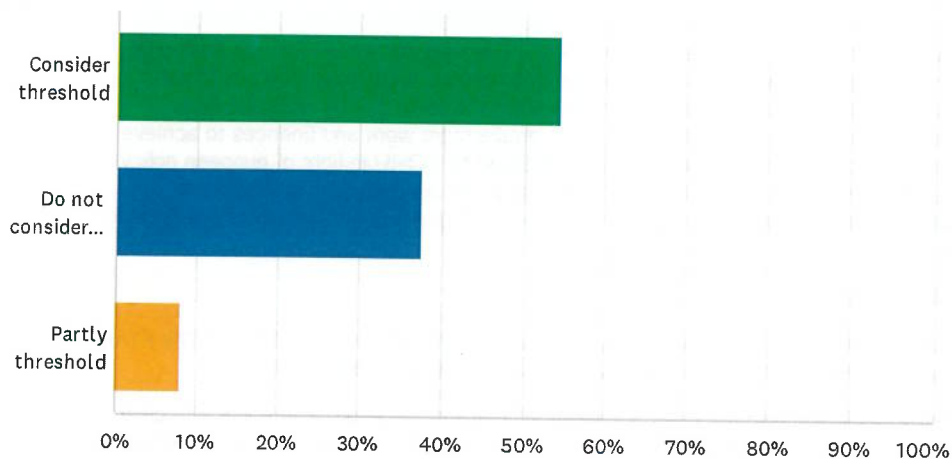
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have inevitable effects on the therapeutic process. The effectiveness of psychotherapy rests very much on the quality, confidentiality and protection of this relationship..

4	Without embedding requirements for personal therapy and clinical supervision, there is a risk of the loss of both of these elements from some training programme (and we have already heard of plans in this direction from other providers) and the consequent diminished competency of graduates and increased risk to the public.*	11/30/2023 12:23 PM
5	There is broad international agreement that psychotherapy is a NFQ level 9 practice. There are those who hold a different view, including in Ireland, but they are in a minority. The complexity and individualised or novel nature of practice with service users is beyond the proficiency level of a level 8 qualification. The importance of inclusivity can be met by providing stepping stones to a level 9 qualification, including through counselling as a level 8 profession and through alternative entry routes to training. A number of the proposed proficiencies are alarming basic and inadequate and are, in fact, set as the threshold for entry to training.	11/30/2023 12:15 AM
6	The proposals suggest that a Psychotherapist can be trained at undergraduate level. Currently, Psychotherapists are trained to Masters Level to ensure appropriate level of education training and research skills	11/26/2023 6:11 PM
7	Counselling and Psychotherapy is client led. We work with the client to develop an agenda. All work is done collaboratively. A therapeutic alliance is developed. There is no team, relatives or carers. We work with members of the public, not people in care.	11/23/2023 12:26 AM
8	An undergraduate degree is very broad and is not enough to specialise in this field	11/22/2023 2:10 PM
9	Ensure psychotherapists meet and respond to their clients in a developmentally appropriate - protect our vulnerable clients	10/25/2023 3:03 PM
10	Psychotherapy is not like any of the other professions already regulated by CORU and cannot be fit into a box that is the wrong shape. Without clinical supervision as a central pillar, psychotherapy training would be weakened.	10/22/2023 12:31 PM
11	Without embedding requirements for personal therapy and clinical supervision, there is a risk of the loss of both of these elements from some training programme (and we have already heard of plans in this direction from other providers) and the consequent diminished competency of graduates and increased risk to the public.	10/21/2023 6:39 PM
12	psychotherapists are not trained to assess	10/3/2023 10:58 AM

Q56 Criterion 1.1 The Counsellors and Psychotherapists Registration Board requires that the minimum qualification level for entry to the register is: Level 8 on the National Framework of Qualifications (NFQ)

Answered: 136 Skipped: 292



ANSWER CHOICES	RESPONSES	
Consider threshold	54.41%	74
Do not consider threshold	37.50%	51
Partly threshold	8.09%	11
TOTAL		136

Q57 If you do not consider this criterion to be threshold or you consider it only partly threshold then please explain why

Answered: 62 Skipped: 366

#	RESPONSES	DATE
1	I reviewed the inclusion criteria and the rational ...I am not convinced that the additional hours in training & supervision will deliver the competence required for the sustained complex work of psychotherapy relationships - and the level 9 entry would be more appropriate. Access criteria at this level does require more work and finances to achieve standard; de facto the accessibility issue considered by CORU in light of european policy does not hold weight in my opinion given that many who are presently qualified and accredited have come for diverse socio-economic backgrounds and do reflect the diversity of Irish people.	12/1/2023 4:57 PM
2	It should be Level 9	12/1/2023 4:33 PM
3	Currently the entry level for training as a systemic psychotherapist is at Level 9 The FTAI strongly disagree with the suggestion that this should be lowered to level 8	12/1/2023 4:27 PM
4	We need to be in line with the EAP Standards of Training - at least level 9 and with clear CPD requirements for continuing professional development. To include group processes, experiential learning, supervision and personal work. We can only work at depth with the person when we have worked at depth with ourself.	12/1/2023 3:34 PM
5	a requirement of level 8 reduces the current standards set and exposes the public to greater potential risk. It also impedes professional transfer across the EU where many countries have level 9 as a minimum requirement for entry to the profession.	12/1/2023 1:28 PM
6	I think the threshold should be more. The minimum qualification level for entry to the register should be Level 9 (NFQ: Post-Graduate Level)	12/1/2023 1:14 PM
7	IAHIP and EAP standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland). CORU's stated aim of accessibility to the profession could still be achieved at Level 9 by RPEL (recognition of prior experiential learning) processes to recognise diverse prior learning experience.	12/1/2023 11:47 AM
8	It should be level 9 - the criteria mentioned requires a higher level of education (more in my written submission)	12/1/2023 11:15 AM
9	The current level of entry for Psychotherapist to register with both Irish Council of Psychotherapy ICP and European Association of Psychotherapy, EAP is Level 9	12/1/2023 8:55 AM
10	IAHIP and EAP standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland). This CORU standard would require psychotherapists to hold only a three or four year primary degree. CORU's stated aim of accessibility to the profession could still be achieved at Level 9 by RPEL (recognition of prior experiential learning) processes to recognise diverse prior learning experience.	12/1/2023 6:15 AM
11	Level 8 does not seek the maturity or person or integration, and necessary depth learning outcomes. A therapist cannot help a client go where they've never personally gone themselves. In order to build a deep and safe relationship with a client, the therapist needs all the skills, flexibility and nous necessary. Settling for level 8 would make Ireland an outlier in Europe for being below the international standard of level 9.	12/1/2023 1:50 AM
12	The European Association for Psychotherapy minimum standard is a level 9 qualification.	11/30/2023 7:49 PM
13	The entry standard for training as a psychotherapist should continue to be an honours bachelor's degree in human sciences or equivalent ; supporting such an entry standard would continue to guarantee the very high standard of training and education which already exists in the Irish context. This would then lead to a threshold of Level 9 as a minimum for entry to a register for psychotherapists. As most psychotherapy training programmes currently produce graduates at level 9, following 4 years of training in a particular modality, this would guarantee retention of the high standard which currently exists . With an entry to training for psychotherapy being level 8 or equivalent (RPEL) it does not exclude anyone from entry to the profession of psychotherapy; anyone interested in third level education can by a variety of pathways, make a commitment to becoming a psychotherapist . For	11/30/2023 5:34 PM

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example, following a primary degree in counselling or human sciences and achievement of a level 8 honours degree, students could then embark on professional training as psychotherapists, graduating at level 9 and being eligible to enter the psychotherapy register.

14	CORU standards would require psychotherapists to hold only a three or four-year primary degree. Irish and European standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland). This allows time to develop critical thinking skills and personal maturation necessary in the nuanced and complex relationship of psychotherapist and client. Coru's goal of accessibility can be achieved by e.g. recognition of prior learning, or 'equivalent' placed against the requirement for a primary undergraduate degree as there are multiple valid ways to achieve Level 9 as we move through life. The more varied routes to Level 9 the more diverse competencies that can be brought into the profession; however the training and experience of Level 9 is necessary.	11/30/2023 4:21 PM
15	Many of the core skills outlined, including skills 3, 7,9 and 16 require levels of critical appraisal and specialised learning acquired at Level 9 training.	11/30/2023 3:51 PM
16	Psychotherapy practice frequently involves working with vulnerable people who have challenging life histories, experience of childhood adversity and complex trauma. These have often impacted the service user on multiple levels causing dysfunctional patterns of living. Psychotherapeutic responses are normally individualised, complex and address multiple dimensions of the person. Frequently the service user had maladaptive relationships with significant mistrust of other people including psychotherapists. Psychotherapists entering the profession need to be able to formulate their work with individual service users in a bespoke way, integrating various approaches to address developmental gaps, relational damage, maladaptive attachments, mistrust, poor sense of self worth and other impacting factors. Coherent blending of psychotherapeutic concepts and approaches is required as a minimum for safe practice. A strong capacity to engage in social critique, and to reflexively monitor ones own positionality across a number of domains is a necessary adjunct to this. These proficiencies align with NFQ level 9 learning outcomes. Setting the entry-to-the-register at level 8 is unsafe and is not aligned with broad international practice. Level 8 learning outcomes are insufficient and unsafe for psychotherapy practice.	11/30/2023 1:28 PM
17	ENTRY level	11/30/2023 1:23 PM
18	The [REDACTED] does not see this as the correct minimum level of qualification for entry to the register; we are of the firm belief that threshold level should be set at a minimum of Level 9. We recognise that Level 8 programmes often provide a basis for other professions, as well as a strong basis for postgraduate study, and we believe than an undergraduate degree, in the health or social sciences, should continue to form part of the entry requirements for a postgraduate psychotherapy-specific training. The requirement for entry criteria to include holding a relevant undergraduate degree is embedded in the European Association for Psychotherapy (EAP) definition of psychotherapy, and is recognised internationally as best practice. We are concerned that the CORU proposals have an incorrect, implicit assumption about the nature of the work of psychotherapy that understandably leads to proposals about what kind of training may be appropriate for this kind of activity. Psychotherapy is really a fluid engagement rather than a set of interventions, as seems to be assumed here. While the documents acknowledge the therapeutic relationship, and include statements around conscious and unconscious processes, the full significance of this is not apparent in most of the proficiencies that are outlined. The proficiencies are more in keeping with an intervention-oriented approach, including those that involve specific programmes responding to particular kinds of diagnostic categories. In essence, they are framed in undergraduate terms that would not allow for assessment of students at the threshold level at which we expect them to practice in the interests of public safety. These criteria do not recognise the highly complex work in which psychotherapists engage with highly vulnerable clients. Level 8 would put Ireland below the accepted standard in Europe, USA and Canada. Free movement to other jurisdictions is also a consideration; graduates would be excluded from practice in other countries should they not have a completed a postgraduate training that meets international standards. More locally, employers in Ireland such as the HSE and the Dept of Education require applicants to hold relevant undergraduate degrees in addition to their psychotherapy qualification and accreditation. This suggests that they understand that the needs of clients are greater than the CORU proposed standards encompass. At level 8, Ireland would be adopting the lowest standards for regulation of psychotherapists to date — no other country that has regulated the profession has considered an undergraduate degree to be appropriate as a level of training. It would be ironical if, in the name of 'public safety', Ireland was to adopt standards that are lower than current self-regulating bodies and employers require. We understand that the proportionality assessments are a key aspect for CORU Registration Boards and that this directive requires the Boards to balance	11/30/2023 12:27 PM

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considerations regarding access to the profession with considerations on public interest, health, and safety. To conclude, we do not believe that an undergraduate degree would protect the public: instead it would reduce the level of protection currently afforded [REDACTED] and by the employment standards currently set by agencies such as the HSE and the Department of Education.

19	I think that it is important that Psychotherapists are trained to at least Msc level, in order to meet and understand the in-depth work of psychotherapy	11/30/2023 12:12 PM
20	This is below the current level of qualification required and as such is a backward step for the profession and will diminish its standing.	11/29/2023 3:02 PM
21	level 8 qualification gives the therapist a theoretical understanding, a practical application to be able to work in a psychotherapeutic environment with clients.	11/29/2023 1:23 PM
22	Lower level than currently operating at. Prior experiential learning could be recognised in exceptional cases but the subtleties inherent in the work suggest the minimum level should be 9	11/28/2023 8:55 PM
23	Level 9 standard should be mandatory	11/28/2023 7:59 PM
24	Level 9 is the current standard and should be kept . However, there can be a variety of RPEL that could be used to bring it to level 9.	11/28/2023 4:32 PM
25	Level 8 is not sufficient to be qualified as a Psychotherapist. Currently Psychotherapists take on additional training after their initial Undergraduate degree together with work experience before embarking on training in Psychotherapy. It is essential for public safety and service user safety that the education level for psychotherapy is at level 9	11/26/2023 6:13 PM
26	· Seven years of training, ending in a postgraduate qualification (level 9 in Ireland).	11/26/2023 10:30 AM
27	Grandfather recognition level 7 accredited , experienced Psychotherapist.	11/25/2023 10:52 AM
28	Grandfather recognition for Level 7 accredited, experienced psychotherapists	11/25/2023 10:52 AM
29	A 4-5 year degree programme for counselling qualification is fine. Psychotherapy training needs more time for integration and experience to develop with complex early development deficits & trauma.	11/24/2023 1:27 PM
30	In most jurisdictions across UK and Europe the level of knowledge and skill required for the effective provision of Cognitive Behavioural Psychotherapy (which is inclusive of the understanding of research and the ability to conduct research) is Master level (NFQ9) this is consider the minimum competency level it is confusing as to why in Ireland a lower competency level should be deemed appropriate.	11/24/2023 11:09 AM
31	Minimum standard of degree	11/24/2023 9:47 AM
32	Level 9 is more appropriate	11/23/2023 10:52 PM
33	There is a need for postgraduate qualification for psychotherapists to maintain training standard in Ireland, similar to other countries. Recognition of prior experience can help increase accessibility but level 8 does not allow for the range and depth of training involved.	11/23/2023 7:52 PM
34	CORU standards would require psychotherapists to hold only a three or four-year primary degree. IAHIP and EAP standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland). CORU's stated aim of accessibility to the profession could still be achieved at Level 9 by RPEL (recognition of prior experiential learning) processes to recognise diverse prior learning experience.	11/23/2023 5:44 PM
35	CORU standards would require psychotherapists to hold only a three or four-year primary degree. IAHIP and EAP standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland). CORU's stated aim of accessibility to the profession could still be achieved at Level 9 by RPEL (recognition of prior experiential learning) processes to recognise diverse prior learning experience.	11/23/2023 5:32 PM
36	Currently under European Association of Psychotherapy (EAP) seven years training is required. So initial training should be a Level 8 but full training culminating at Level 9	11/22/2023 6:39 PM
37	It is safer for public to set psychotherapist qualifications at level 9 (NFQ) considering the level of depth and length of therapy process involves.	11/22/2023 5:36 PM
38	IAHIP and EAP standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland). CORU's stated aim of accessibility to the profession could still be achieved at Level 9 by RPEL (recognition of prior experiential learning) processes to recognise diverse prior learning experience.	11/22/2023 3:31 PM

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39	A level 9 specialised qualification is essential for therapy (Psychotherapists)	11/22/2023 2:10 PM
40	Psychotherapy is level 9 and needs to stay at this for the protection of the public	11/22/2023 1:31 PM
41	IAHIP and EAP standards mandate that psychotherapists undergo seven years of training culminating in a postgraduate qualification (Level 9 in Ireland).	11/22/2023 12:57 PM
42	A CAO process leading to a registered Psychotherapist after a 3 year primary degree is unsafe protection of the public. Level 9 allows for more time and more training on the complexities of psychotherapy. CORU's stated aim of accessibility to the profession could still be achieved at Level 9 by recognition of prior learning processes to recognise diverse prior learning experience.	11/20/2023 4:28 PM
43	I believe counsellors and psychotherapists should be separated to allow for more counsellors to have access to the register. This excludes all those at diploma level.	11/20/2023 3:28 PM
44	I think the human mind is very complex and when we are in times of suffering, we along with our nearest and dearest are at our most vulnerable. We need to place the safeguarding of these people at the forefront. To ensure the protection of these vulnerable people, we need to be training our mental health professionals to be the best they can be. In putting the threshold at only a degree for this profession, we are doing both our clients and our therapists a huge disservice. We're demanding of our therapists to be less than they can be and we're offering our clients a service that does not acknowledge & care for their complex need, as it discounts the very expertise and indeph knowledge of our mental health professionals.	11/14/2023 1:43 AM
45	For psychotherapy, it may be adequate to require a level 9, while counselling requires a level 8.	11/3/2023 1:49 PM
46	This should be level 9 or postgraduate education for psychotherapy to be aligned with European standards . It is of conecern that Coru is proposing a reduction of standards making employability for psychoterapists in Europe impossible and reducing standards for psychotherapy placing the publoc at risk - postgraduate education requires critical thinking which is not always a requirment at graduate levels	11/3/2023 11:42 AM
47	Masters level	10/25/2023 5:11 PM
48	Level 8 training is simply not suitable for psychotherapists, this Level would put Ireland below the accepted standards in USA, Canada and Europe. It is unsafe and needs to be addressed as a a matter of urgency. Level 9 is required.	10/25/2023 3:04 PM
49	Level 8 would not equip a graduate to practice psychotherapy safely, ethically or competently. Level 8 is fine for counsellors but psychotherapists scope of practice is wider, clients more complex, duration of engagement is much longer, decision making needs are much higher, integration of more diverse theories is needed and more depth of knowledge is required. This is just the tip of the iceberg! The capacity to work with the unconscious (both client and therapist) is multiplied, the vulnerability of clients is significantly higher etc. etc... In addition, the psychotherapist needs more than one degree - they need both an undergraduate degree in a relevant area as well as a postgraduate degree in psychotherapy specific studies.	10/22/2023 12:47 PM
50	█ believe that the threshold level for entry to the register should be level 9 – that is postgraduate level. o Level 8 is not suitable for psychotherapists as it does not allow for assessment of students at the level at which we expect them to practice. o These criteria do not recognise the high level of level 9 training currently offered in Ireland, and throughout Europe, and the high standard of complex practice that psychotherapists engage in, and the need to maintain level 9 competencies and proficiencies in recognition of the highly complex work in which psychotherapists engage with highly vulnerable clients. Public safety is our primary consideration. o Level 8 would put Ireland below the accepted standard in Europe, USA and Canada and provide an unsafe environment for both clients and practitioners. o There is an identified need for applicants to hold a relevant undergraduate degree prior to psychotherapy training which is not reflected in the draft documents. To reinstate this would help to maintain current standards as required by psychotherapist professional bodies both in Ireland and abroad, and further the distinction between counselling and psychotherapy. o An additional concern is for graduates who will be excluded from practice in other countries should they not have a completed a postgraduate training that meets European Association for Psychotherapy standards. If level 8 is confirmed, Ireland would be adopting the lowest standards for regulation of psychotherapists to date - no other country that has regulated the profession has considered an undergraduate degree to be appropriate as a level of training, or the associated learning outcomes to be sufficient for competent practice. Many EU countries have restricted psychotherapy practice to professions such as doctors, psychiatrists, psychologists or other specified professions - none of which are practiced at undergraduate degree level. Others, such as Austria and Malta, have regulated for	10/21/2023 6:40 PM

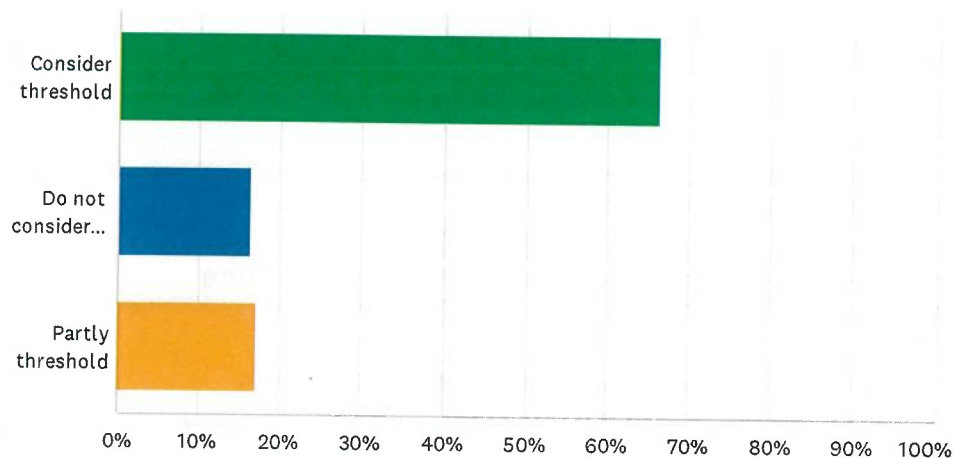
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(Psychotherapists)
psychotherapy as an independent profession requiring post-graduate level training. We understand that the proportionality assessments (EU Directive) (as referenced below for various clauses) are a key aspect for CORU Registration Boards and that this directive requires the Boards to balance considerations regarding access to the profession with considerations on public interest, health, and safety. The requirement for member states to be able to rely on a common regulatory framework across the EU is also understood, as is the need to articulate risks to public interest objectives (including protecting the public which may require a higher entry level, specified minimum duration of training, and higher standards of proficiency, identified for that profession as linked to the complexity of tasks to be performed (Clause 25). Clearly, as is noted in clause 20, the voice of those practicing and with extensive experience in the profession (and in-depth knowledge of the complexity involved) is particularly important in assisting those making the determination understand the profession, in this case psychotherapy, they are seeking to regulate. It is for this reason that [REDACTED] is currently concerned by the draft criteria recently published and is making this detailed submission to you. In addition, employers such as the HSE and the Dept of Education, require applicants to hold relevant undergraduate degrees in addition to their psychotherapy qualification and accreditation. This suggests that they understand that the needs of clients are greater than the CORU proposed standards encompass. Free movement to other jurisdictions is also a consideration (Clause 23 of the European Directive): a holder of a level 8 award would not meet criteria for registration in any other country that we know of. It would be ironical if, in the name of 'public safety', Ireland was to adopt standards that are lower than current self-regulating bodies and employers, require.

51	I think level 9 should be the minimum qualification level for entry to the register, ensuring that applicants have undertaken enough and thorough training	10/18/2023 10:29 PM
52	Minimum qualification level for entry to the register should be Level 9. Applicants to a level 9 course should hold an undergraduate degree. Level 8 is not suitable as it does not assess students at the level required to practice effectively as a psychotherapist. Level 8 is also below the European and internationally accepted standard for psychotherapists. Also this criteria does not recognise the current high level 9 training offered in Ireland.	10/18/2023 11:48 AM
53	Masters Degree Level 9 should be the minimum requirement for a psychotherapist	10/12/2023 9:22 PM
54	Level 9 required	9/15/2023 1:45 PM
55	I think this should be level 9.	9/14/2023 1:45 PM
56	should be a higher level undermines our profession setting a lower standard	9/13/2023 8:32 PM
57	A level 9 should be required to call yourself a psychotherapist and should include evidenced-based treatments and deeper knowledge of medical treatments as well as no medical.	9/13/2023 4:56 PM
58	There are many fine therapists that have many years experience that cannot be measured by a L8 degree and they could be lost from the profession. This is such a unique profession that cannot be clinically measured	9/9/2023 1:47 PM
59	Level 7 with enough therapeutic experience or therapeutic hours and supervision would be fine	9/8/2023 2:42 PM
60	I feel that a Masters should be the minimum threshold for psychotherapy	9/6/2023 6:34 PM
61	Level 8 for Counsellors Level 9 for psychotherapists	9/6/2023 6:20 PM
62	What about the therapist that have been working for many years as psychotherapists, that have an honours degree.... are we to be downgraded	9/5/2023 1:00 PM

Q58 Criterion 2.2 The programme must ensure that each student completes 500 hours of practice placement.

Answered: 128 Skipped: 300



ANSWER CHOICES	RESPONSES	
Consider threshold	66.41%	85
Do not consider threshold	16.41%	21
Partly threshold	17.19%	22
TOTAL		128

Q59 If you do not consider this criterion to be threshold or if you consider it only partly threshold, please explain why

Answered: 43 Skipped: 385

#	RESPONSES	DATE
1	The range of psychotherapy training is so diverse that the number of practice hours needs to be flexible.	12/1/2023 4:41 PM
2	Systemic Psychotherapy Education and Training has always included practice placement under supervision during the training years	12/1/2023 4:31 PM
3	Need to have clarity around Supervision. Number of hours per client ratio, Supervisor accreditation and training. clincial supervision and supervision within the training programme. How can this be a safe, learning, nurturing experience for the Psychotherapist in training.	12/1/2023 3:43 PM
4	This is too many unpaid hours, particularly if they must be on-site in-person.	12/1/2023 2:47 PM
5	There should be no requirement to have directly supervised contact as the type of supervision is not specified in the proposed code.	12/1/2023 1:31 PM
6	This number is too low and will not give suifficent practice to enable compentience in delivering psychotherapy safely to the public.	12/1/2023 9:03 AM
7	Where do these types of placements exist? They don't - so where will trainees actually work? Most clinical training now is offered free or low cost in charitable organisations.	12/1/2023 1:57 AM
8	I don't see how practical it is to do 100 directly observed service user hours.	11/30/2023 8:06 PM
9	500 hours of practice placement as unpaid work is unattainable. It would make the transition from student to therapist too long.	11/30/2023 5:20 PM
10	The threshold of 500 hours of practice placement is an choice for quantity over quality and would probably preclude many working professionals from undertaking psychotherapy studies. In the current standards of some of the bodies making up the Irish Council for Psychotherapy, placement cannot commence until the third year of studies. This would mean that in a four year part-time course the student would need to complete 250 hours of placement contact per year. The reason students do not see service users for two years is that high levels of training are required before exposure to vulnerable clients. Even if students were allowed to work with service users after 1 year of training, this would still require 166 hours of contact each year, which would be an enormous burden for working professionals. Additionally and crucially, Ireland does not have the psychotherapy infrastructure to provide number of placement hours. It is a matter of safety that students do not engage with service users until they have reasonable proficiency in basic skills, thus reducing the window during which students can work with service users. Strategies such as " work shadowing" which are used to support early placements in other professions can not be employed safely in psychotherapy due to the central role played by a stable therapeutic alliance in effective psychotherapy and also due to service-users often having histories of mistrust and unstable relationships. A more realistic figure for placement hours would be 300-350 as this would support learning, public safety and inclusion (of working people who may wish to train as psychotherapists).	11/30/2023 3:42 PM
11	 agrees that practice placements must be integral to the programme. However, this is an area where different modalities have currently very different practices, and where there is also a variance between child/adolescent and adult programmes. There is apparent agreement on the value of placement experience, including a level of direct clinical contact, the exposure to clinical thinking and practice within a placement environment, and the learning around the roles of different professionals within a team in a setting. However, we are concerned by what we have heard so far in regards to what constitutes an acceptable 'placement setting'. Clinical practice and how it is managed does not equate with the practice placement element in the training of other professionals. Neither does the 'supervision' of such practice. Many trainees complete their clinical practice in settings where there may not be other psychotherapist in situ (e.g., family resource centres, schools, care settings). This practice has also resulted in the expansion of availability of psychotherapy in the community and the employment of graduates in settings where no psychotherapist was previously employed. Some students practice within more structured	11/30/2023 12:36 PM

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placement settings but may be there out of usual hours when all staff may not be on-site. In addition, some mature students are already practising independently as psychologists, counsellors, psychiatrists, etc., and are self-employed. They should be able to complete clinical practice, under the eye of the practice education team – including clinical supervisor, within this setting. We would urge that we think of two kinds of settings here, both of which are a part of the training programme: 1. A placement setting in which a trainee can develop an understanding of how services operate, the nature of presenting difficulties, the range of services available, professional activities, relationships, forms of communication, etc. 2. The location of the supervised practice and/or of the clinical supervisor. We believe that thought must be put into this area, and the practical working out of this would require close consultation with the different modalities.

12	There are important ratio's for Supervision being adhered to presently, while in training and pre-accredited therapists - it is of the utmost importance that these remain in place as they offer the support and guidance to Supervisees who are at an early stage of their developing profession	11/30/2023 12:17 PM
13	Currently students need 120 hours practice placement hours prior to commencing working toward accreditation. This appears sufficient.	11/30/2023 11:41 AM
14	I would see this as a very challenging requirement as a mature student who is working and has a young family. I appreciate that the experience gained from this number of practice hours would certainly contribute to safeguarding service users once a student graduates but to be able to do the hours within the period of the training programme may be a very big stretch for some students who have young families. If these hours could be reduced to 350-400 hours it might be more manageable. An alternative suggestion is that students (upon special request) could have a number of years once the academic part of the course is finished to complete these hours before graduating.	11/29/2023 5:02 PM
15	Language confusing - observed service user contact ??	11/28/2023 8:59 PM
16	All practice in the profession needs supervision at different ratios according to experience. This is the accepted European model	11/28/2023 6:41 PM
17	As long as practice placement	11/28/2023 4:38 PM
18	Currently people begin training with some clinical background so they already have had exposure to clinical environments/ service users/ The proposals suggest that 500 hours if enough	11/26/2023 6:19 PM
19	This 500 hours of practice is NOT informed by the therapists Personal Therapy experience or the required proficiency of Professional Clinical Supervision capable of providing robust Supervision	11/26/2023 10:36 AM
20	I question the use of 'directly observed service user contact' in what is a two way therapeutic relationship the interaction is likely to be influenced by the observation of a third party.	11/24/2023 1:36 PM
21	Having been involved in Cognitive Behavioural Psychotherapy training and Education for the last 20 years it is very difficult to see how the education provider can 'ensure' this 500 hour metric unless the programme itself is 'commissioned' by the HEA in which case the HEA would need to take responsibility for the placement provision. This model is used often in nurse or social work training and while there are often difficulties here it is a model which works but it is not a model which would easily translate to Psychotherapy training.	11/24/2023 11:18 AM
22	500 hours of supervised practice is the appropriate standard	11/24/2023 9:58 AM
23	This is below current standards of Irish Council of Psychotherapy. It should be a minimum of 600 hours of practice placement. Also the language and terminology is not in keeping with the practice of psychotherapy.	11/22/2023 6:44 PM
24	All client hours until accreditation shall be adequately supervised. Supervision is mandatory even after accreditation to ensure the quality of the profession.	11/22/2023 5:50 PM
25	I feel this could be divided into supervised placement hours and clinical supervised own trainee practice hours	11/22/2023 3:41 PM
26	Therapy is 1-to-1 work that requires full mental and emotional energy from the practitioner. It differs from other health care professions like social care or social workers, where 500 hours can be obtained in placement of 9am-5pm working days while their academic hours/lectures pause to allow them to do so, psychotherapy is done on an hourly basis, not a full 7/8 hour working day. While studying, psychotherapy students are also required to put hours into lectures and assignments and into practicum modules which do not pause while on practical placement. Psychotherapy courses are also full fee paying, costing between a few to several	11/20/2023 4:09 PM

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 grand a year not including a student's own therapy and supervision expenses, so often student are working fulltime along side their Psychotherapy studies. These academic hours and work already demand a lot from students, therefore 500 practice hours is unrealistic for psychotherapy students to complete. 500 practice hours is more realistic to complete after a student completes their studies and is qualified. 100 hours of direct service user contact also breaches the confidentiality of therapy and the ease of a student's role as a practitioner. Being observed inhibits a practitioner's confidence and ability to do the work, therefore contradicting and disturbing the therapy space, so no real work can be achieved. In many current Psychotherapy training course, 'fishbowls' exercises where students and supervisors observe practice sessions with each other offer an insight to how student practitioners practice within a session. Or alternatively, clients can be invited to offer feedback on their sessions with students.

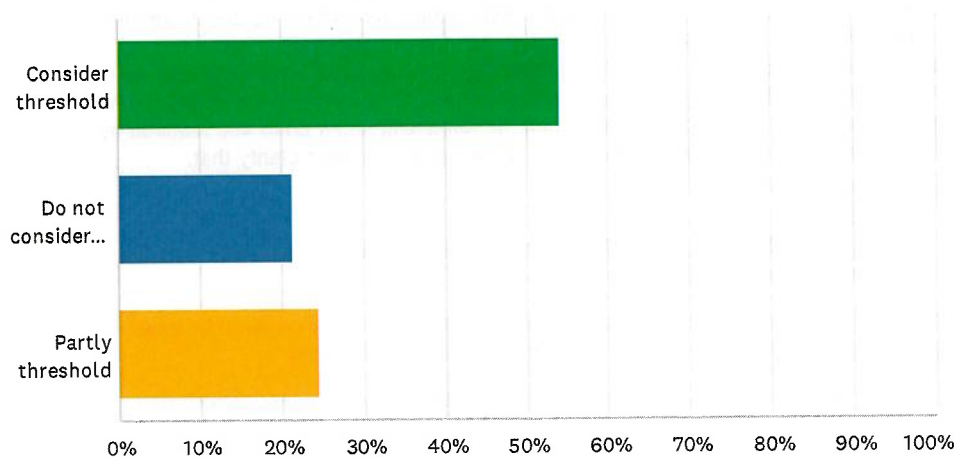
27	500 hours are A LOT of hours for students to complete. This level of hours requires a large number of supervision hours, which, in turn, comes with large financial commitments. As a student, there may be financial constraints. Furthermore, students may have personal limitations, such as pregnancies, illnesses, or other jobs, which will increase the time it takes to complete those 500 hours. Overall, this may make a large number of potential students not want to undergo the training. Ireland needs mental health practitioners and standards should not scare people away from the profession.	11/3/2023 1:55 PM
28	Clinical practice settings need to reviewed further, there are not always psychotherapists on site and this should not be a requirement as it will add unnecessary restrictions on students for placements. Supervision of clinical practice should be provided by the training provider not the placement site. A mentor of site is useful but clinical practice should be linked to the training provider.	10/25/2023 4:43 PM
29	Interesting, and a bit baffling, that you consider academic aspects of practice work can be included, yet clinical supervision cannot! The range settings for practice placement is too narrow. It is not necessary, or even possible, for each placement setting to have an onsite psychotherapist. Many excellent placements are facilitated in other community settings and the clinical practice is supervised by the clinical supervisor. This works extremely well! The central component is that supervised clinical practice is supervised by an appropriately qualified clinical supervisor - this is not the same as simply another registrant on the CORU register. An allocated person in the placement site is well able to provide formative feedback in many aspects of professional work (within the generic range of proficiencies) even if not a psychotherapist.	10/22/2023 12:48 PM
30	■■■■ believes that 500 hours, which includes up to 150 hours involved in the academic elements associated with the delivery of practice placement, is fine. However, we are concerned by what we have heard so far in regards what constitutes an acceptable 'placement setting'. Clinical practice and how it is managed does not equate with the practice placement element in the training of other professionals. Neither does the 'supervision' of such practice which we will address later in this submission. Many students complete their clinical practice in settings where there may not be other psychotherapist in situ (e.g. family resource centres, schools, care settings). This practice has also resulted in the expansion of availability of psychotherapy in the community and the employment of graduates in settings where no psychotherapist was previously employed. Some students practice within more structured placement settings but may be there out of usual hours when all staff may not be onsite. In addition, some mature students are already practicing independently as psychologists, counsellors, psychiatrists etc and are self-employed. They should be able to complete clinical practice, under the eye of the practice education team – including clinical supervisor, within this setting.	10/21/2023 6:41 PM
31	450 can be enough	10/21/2023 6:17 PM
32	direct supervision is not current practice in ireland	10/20/2023 9:16 PM
33	This criteria almost makes it impossible for people to study psychotherapy. Most people studying for this profession are not school leavers living at home, they are typically people with life experience, bills/families and mortgages to pay. To add, 500 hours with no pay is exploitation. With the amount of assignments/reading/college days/supervision and current personal therapy requirement alongside group supervision , I do not see how 500 hours would be possible. It is difficult to even gain placements in some areas. The training in itself at Level 8 costs approximately 17,000 eur. Then the "student" has to pay for their supervision, find their own placement, pay for personal therapy, their own insurance, and be part of a governing body. Its costs a person overall upward of €20,000 to become qualified in the first instance. Students absolutely need "real world" clinical placement that is a must but not the 500 being proposed.	10/6/2023 1:52 PM
34	define direct observation	10/3/2023 11:01 AM

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35	Putting in extra Supervision requirements might deter practices offering student hours. Many services could be low cost and may not have the funding to pay for that level of supervisors. Which would follow that there may be less practice opportunities for students. This is an extra commitment for students to work for free. Not seen in other practices.	9/22/2023 5:44 PM
36	I believe 300 hours may be more appropriate.	9/19/2023 6:14 AM
37	This statement is not clear. Do you mean the remaining 150 hours do not have to be supervised? Or can these hours consist of non-direct client hours? Are the 500 hours client contact hours? And then in terms of the 100 hours directly observed service user contact - what do you mean by this? I assume this would include 100 hours in college settings being observed by tutors, rather than having someone else in the room observing client work out in the community? Also this is significantly higher than the current system which means that many people will be unable to join the register? My training for example required me to have minimum of 200 direct client hours on placement, which is I believe the current highest expectation of any education provider - and then the remaining hours up to 450 required by IACP are done during a preaccreditation phase. So perhaps you could clarify that.	9/14/2023 1:49 PM
38	yes at least 500 hours	9/13/2023 8:36 PM
39	I agree with including this in the degree however it should stipulate that trainees should be paid at least minimum wage for their services.	9/13/2023 4:59 PM
40	Time cost and delays to meet that standard could cause more harm than good as may put so many off to get there and so not end up helping those in need greatly	9/8/2023 2:45 PM
41	This is missing core training out and also any sense of competence measurement too	9/7/2023 12:29 PM
42	Due to recent separation of IACP & IAHIP the 500 hours for students might prove difficult to complete with increased difficulty to find supervisors Perhaps a different ratio of hours could be looked at during qualification stage (additional 50 hours) and then once qualified 450 hours required as at this stage the student is required to change supervisor entering pre - accredited stage	9/5/2023 5:07 PM
43	the profession is poorly paid as it is. 500 hours of work at an even lower rate is unfair. there is too much variation across 3rd level institutions in how therapists are deemed to be fit to practise. more emphasis on ensuring therapists are actually fit to practise BEFORE they graduate would improve quality. reducing the requirement for pre accredited hours would allow professionals to begin making back some of the thousands of euro it costs to train as a psychotherapist.	9/5/2023 3:55 PM

Q60 Criterion 2.2 Of the 500 hours of practice placement a student must complete, 350 hours must be supervised service user contact experience.

Answered: 131 Skipped: 297



ANSWER CHOICES	RESPONSES	
Consider threshold	54.20%	71
Do not consider threshold	21.37%	28
Partly threshold	24.43%	32
TOTAL		131

Q61 If you do not consider this criterion to be threshold or if you consider it only partly threshold, please explain why

Answered: 53 Skipped: 375

#	RESPONSES	DATE
1	As for 59	12/1/2023 4:41 PM
2	Systemic Psychotherapy Training	12/1/2023 4:31 PM
3	The word client is much more appropriate. Need for Supervisors who have depth and range of experience in a range of clinical areas, trauma, developmental and relational trauma, complex family dynamics and attachment through the life cycle	12/1/2023 3:43 PM
4	250 would be more reasonable.	12/1/2023 2:47 PM
5	With the appropriate ratios of client hours to supervision hours, I consider all the 500 hours need to be supervised.	12/1/2023 11:50 AM
6	The number is too low and the method of supervision must be reviewed. There are a variety of ways of receiving supervision on practice. In my modality, Systemic Family Therapy this is done by direct live supervision. It takes place in year two and tress of training and in year four there is retrospective supervision wiht a supervisor.	12/1/2023 9:03 AM
7	Make sure the placement co-ordinator and clinical supervisor roles are distinct, defined and protected. External clinical supervision by a trained and experienced psychotherapist is vital.	12/1/2023 1:57 AM
8	All of the 500 hours of practice placement a student must complete should be should be supervised, by a qualified/accredited psychotherapy-oriented clinical supervisor.	11/30/2023 8:16 PM
9	400 would seem a better number	11/30/2023 8:06 PM
10	I am concerned that supervision of student will not be clinical supervision. The supervision being suggested is more like case management.	11/30/2023 7:59 PM
11	All 500 hours of service user contact (ie. client practice) must be supervised in an appropriate ratio with a modality specific supervisor . Supervisor must be modality specific and operating within the context of the training. Supervisors must be trained within the orientation of each modality.	11/30/2023 5:51 PM
12	Supervision is hugely important, I believe it would be very difficult to develop a real relationship with the client if the work is not confidential, having an observer or recording equipment in the room would change the therapeutic relationship and the experience of the client.	11/30/2023 5:20 PM
13	Unclear what service user contact entails, should not include direct observation but managed through Level 9 training and clinical supervision. The terminology 'service user' speaks to a mindset of state agencies.	11/30/2023 4:31 PM
14	This depends on whether the supervision meets the rigorous requirements and depth of clinical supervision or could be understood under a less demanding 'line management' arrangement. Proper clinical supervision is essential to protect both client and therapist.	11/30/2023 3:55 PM
15	The comments above apply. in terms of 350 service user contact hours as threshold, in a quality over quantity environment 300 high quality service user contact hours spread over three years of a four year programme would be the maximum number of hours that would be consistent with facilitating mature working adults to train as psychotherapists. In order for learners to embrace reflection-on-practice and reflexivity, placement is best spread over an extended period and and assumptions of dense placements with big quantities of contact hours will not serve the development of well balanced, self-aware psychotherapists.	11/30/2023 3:42 PM
16	The number of hours, 350 hours, is fine EXCEPT for the specification that this should be 'supervised' by an on-site psychotherapist. We would accept this criterion as long as the on-site 'supervisor' be replaced with a requirement for an assigned mentor who need not be a psychotherapist as many other professionals could fulfil this role adequately in monitoring/assessing many of the placement objectives, and the balance are best assessed by the CLINICAL supervisor. The following points underpin this: 1. The proposed framework	11/30/2023 12:36 PM

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for clinical practice, and placements, does not reflect current practice and would pose insurmountable difficulties for students, training providers, and placement sites. 2. The proposed model is not compatible with the model in practice in Ireland (or abroad) and appears to be drawn from that in place for professions where qualified practitioners already hold a responsibility to become a practice educator as part of their professional role within statutory agencies. 3. Current placement sites are not regularly in statutory agencies, they are often in voluntary agencies, charities, schools, resource centres and a variety of small private agencies. Schools and childcare settings are also regularly used for placements for child and adolescent psychotherapists in training. 4. Many placement sites are staffed by volunteers, and by staff who would not be able or willing to provide the intensive on-site 'supervision' that is envisaged. 5. The current proposals do not seem to recognise, or else totally disregard, the high quality of level 9 psychotherapy training that currently exists in Ireland, the effectiveness of the clinical practice model in place, and the vital role that clinical supervisors play in the training and assessment of trainee psychotherapists. 6. On-site supervision as currently described cannot be held in any way comparable to the clinical supervision currently embedded in training courses. 7. The mentors that are currently assigned to students on placements are not necessarily psychotherapists, do not engage with confidential relationships, and fulfil a valuable role that is not recognised in the draft criteria.

17	It is important that Supervision remains an important part of training in Clinical placement and current ratio's that are guided by EAP standards are adhered to	11/30/2023 12:17 PM
18	All client interactions ought to be supervised. Requirements for supervision for a student currently stand at 1:5 - as the individual reaches accreditation this alters, dependant on the level of experience. I believe this ought to remain in place	11/30/2023 11:41 AM
19	It would seem reasonable that the majority of the practice hours would be in the context of supervised service user contact experience within a professional agency setting.	11/29/2023 5:02 PM
20	On going supervision essential	11/29/2023 3:08 PM
21	It is through supervision that a student becomes aware in themselves the impact the countertransference taking place	11/29/2023 1:28 PM
22	Language confusing - observed service user contact ??	11/28/2023 8:59 PM
23	Individuals present with a variety of issues, prior experience before joining a programme enhances the knowledge and skillset of the trainee psychotherapists Having the ability to be adaptable to the needs of each individual service user is essential Adaptability is something that has been excluded	11/26/2023 6:19 PM
24	This 500 hours of practice is NOT inform by the therapists Personal Therapy experience or the required proficiency of Professional Clinical Supervision capable of providing robust Supervision	11/26/2023 10:36 AM
25	This would need clarity it this 350 hours direct psychotherapy provision in which case how would a supervisor do this 350 hours this would need greater clarity. In addition what is the evidence base for 350 hours? Wh=ithin accredited programmes providing CBO throughout Europe the minimum metric would be 200 plus hours and it would specify the type of condition to treat along with the number of session and it would look at direct supervision. Again in order for this to be manageable this needs much greater clarity.	11/24/2023 11:18 AM
26	As above	11/24/2023 9:58 AM
27	All placement work should be supervised. Is it possible that some service user work is not supervised?	11/23/2023 7:57 PM
28	Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/23/2023 5:52 PM
29	No requirement for Clinical Supervision for entry to the Register.	11/23/2023 5:37 PM
30	This seems excessive. There is no space for growth or learning. Too much time with the supervisor will result in less work as there will not be enough to 'work with'. The ratio 1:5 has been used and served students well in the past. I would be curious as to the rationale behind such a high amount of supervision for so little client contact hours. Such a requirement will also add considerably to the cost of therapy, and I am not sure to what gain. I do not think this will benefit the public and it does not seem justifiable.	11/23/2023 12:53 AM
31	All clinical practice should be supervised at a ratio of 1 hour of supervision to 4 hours clincial practice. Also the language and terminology is not in keeping with the practice of psychotherapy.	11/22/2023 6:44 PM

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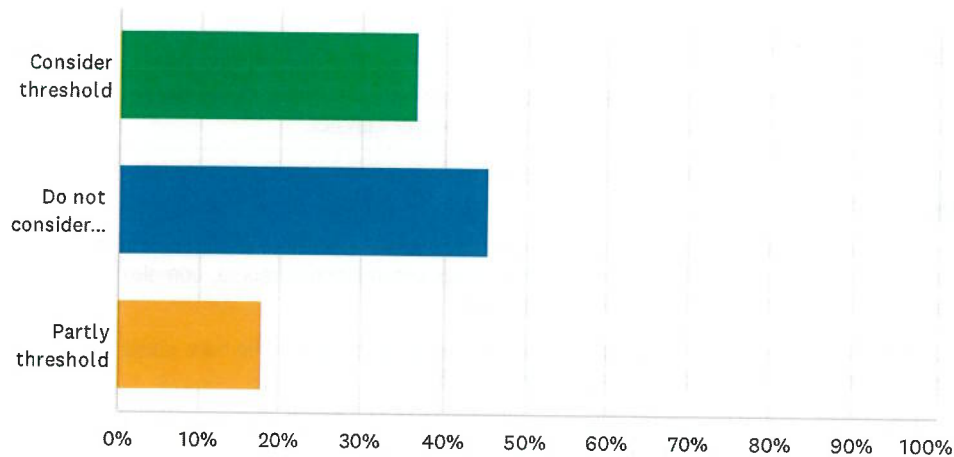
32	It is recommended to have at least 450 to 500 supervised client hours would be required to gather experience and skills before accreditation	11/22/2023 5:50 PM
33	This should include clinical supervision, Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/22/2023 3:41 PM
34	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/22/2023 12:58 PM
35	Currently supervised service user contact experience requirements are in the region of 250 hours for psychotherapists. We see no compelling reason for an increase of 100 hours.	11/22/2023 10:42 AM
36	Placement supervision is not appropriate for supervision; supervisors in the setting reflects a poor understanding of what is needed and seems unduly influenced by a medical or systems model.	11/20/2023 4:28 PM
37	Same feedback as above. 500 practice hours can be realistically expected after studies are complete, and yes they should be while the practitioner is attending supervision.	11/20/2023 4:09 PM
38	I consider that 500 hours of practice placement must be supervised.	11/13/2023 6:03 PM
39	See below	11/3/2023 1:55 PM
40	All 500 hours should be supervised service user	10/25/2023 5:13 PM
41	The clinical practice elements you are proposing will likely cause a lot of problems for students and the supervision you propose does not align with current practices. Clinical supervision needs to be linked to the training provider.	10/25/2023 4:43 PM
42	Clarification on what is 'supervised user contact' versus 'practice of the profession' is needed. it could be useful to specify at least 200 hours of actual clinical practice as part of this 350 hours.	10/22/2023 12:48 PM
43	The criteria explain that the 350 hours placement involves 'practice of the profession' and can include direct contact with clients, planning for sessions, completion of reports, and other administrative duties – as long as all happens at the placement site. The number of hours, 350 hours, is fine EXCEPT for the specification that this should be 'supervised' by an on-site psychotherapist. Many placement sites would be totally unable to meet this requirement. [REDACTED] would be happy enough with the criteria as long as the on-site 'supervisor' be replaced with a requirement for an assigned mentor who need not be a psychotherapist as many other professionals could fulfil this role adequately in monitoring/ assessing many of the placement objectives, and the balance are best assessed by the CLINICAL supervisor. We also believe that clinical supervision hours should be included in the hours calculation. o The proposed framework for clinical practice, and placements, does not reflect current practice and would pose insurmountable difficulties for students, training providers, and placement sites. o The proposed model is not compatible with the model in practice in Ireland (or abroad) and appears to be drawn from that in place for professions where qualified practitioners already hold a responsibility to become a practice educator as part of their professional role within statutory agencies. • Current placement sites are not regularly in statutory agencies, they are often in voluntary agencies, charities, schools, resource centres and a variety of small private agencies. Schools and childcare settings are also regularly used for placements for child and adolescent psychotherapists in training. • Many placement sites are staffed by volunteers, and by staff who would not be able or willing to provide the intensive on-site 'supervision' that is envisaged. • The current proposals do not seem to recognise, or else totally disregard, the high quality of level 9 psychotherapy training that currently exists in Ireland, the effectiveness of the clinical practice model in place, and the vital role that clinical supervisors play in the training and assessment of trainee psychotherapists. • On-site supervision as currently described cannot be held in any way comparable to the clinical supervision currently embedded in training courses. • The mentors that are currently assigned to students on placements are not necessarily psychotherapists, do not engage with confidential relationships, and fulfil a valuable that is not recognised in the draft criteria.	10/21/2023 6:41 PM
44	I cant understand your criteria. Need to be exact hours of individual work with clients (ex 200 hours). From them (ex 30 by inclusive supervision, where supervisor watching sessions work and giving his suggesting and feedbacks) + paper and placement work	10/21/2023 6:17 PM
45	This is an unrealistic threshold, it makes more sense to require trainees to undertake supervision as it will be very difficult for trainees to obtain a suitable placement site	10/18/2023 10:34 PM
46	350 hours is appropriate, however the specification that this should be 'supervised' by an on-site psychotherapist will make opportunities for placements very limited. Clinical supervision hours should be included as part of training requirements.	10/18/2023 12:15 PM

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47	all of the hours should be supervised	10/11/2023 10:59 PM
48	supervision should be mandatory for all hours	10/3/2023 11:01 AM
49	Same as above.	9/22/2023 5:44 PM
50	Again, 300 hours	9/19/2023 6:14 AM
51	upkeep of a higher standard to keep in line with other European countries	9/13/2023 8:36 PM
52	I don't fully understand this - what are the other 150 if not supervised service use contact? Is it trainee to trainee?	9/6/2023 6:37 PM
53	see answer 59.	9/5/2023 3:55 PM

Q62 Criterion 2.2 Of the 350 hours of supervised service user contact experience, 100 hours must be directly observed service user contact.

Answered: 128 Skipped: 300



ANSWER CHOICES	RESPONSES	
Consider threshold	36.72%	47
Do not consider threshold	45.31%	58
Partly threshold	17.97%	23
TOTAL		128

Q63 If you do not consider this criterion to be threshold or if you consider it only partly threshold, please explain why

Answered: 76 Skipped: 352

#	RESPONSES	DATE
1	The underlying mechanism of some psychotherapies such as psychoanalytically based one's would be undermined by directly observed service user contact.	12/1/2023 4:41 PM
2	Training as a Systemic Psychotherapist has always included direct observation therefore the [REDACTED] welcome this	12/1/2023 4:31 PM
3	Please use client. Need for clinical supervisors who have depth and range of experience in a range of clinical areas including trauma, developmental and relational trauma, complex family dynamics and attachment through the life cycle.	12/1/2023 3:43 PM
4	Unclear: does this mean video? Where does standard supervision fit in? The cost would also be extremely high. Some direct observation would be good.	12/1/2023 2:47 PM
5	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising	12/1/2023 12:26 PM
6	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	12/1/2023 11:50 AM
7	This needs to be explained better.	12/1/2023 11:17 AM
8	The hours are too low. For most modalities direct observation would pose serious ethical issues to the client therapist relationship. In Systemic Family Therapy this is the normal practice and it is contracted with the client at the beginning of the relationship.	12/1/2023 9:03 AM
9	There is no requirement for external Clinical Supervision outlined here. This only requires placement supervision on-site of which 100 hours must be directly observable. Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	12/1/2023 6:20 AM
10	Directly observed hours would, in the main, be rejected by clients or at best tolerated as a voyeuristic breach of their intimate space so as to be a "good/obedient client", undermine their agency and sense of being respected and in personal therapy rather than as a kind of guinea pig who is beholden to the service provider. The client would be being used by the therapist.	12/1/2023 1:57 AM
11	100 hours of directly observed service user contact is unnecessary, as long as ALL the 500 hours service user contact is clinically supervised, by qualified/accredited psychotherapy-oriented clinical supervisors.	11/30/2023 8:16 PM
12	per 59	11/30/2023 8:06 PM
13	This seems like an excessive amount of directly observed practice - I do that think its practical. I think presenting part of recorded sessions over the period would be sufficient for the case manager to have a good overview of the student's clinical work.	11/30/2023 7:59 PM
14	Directly observed service user contract is problematic ; there are very many reasons why it should not be considered as part of a supervisory process ; confidentiality , interference with therapeutic alliance and process; transference issues; trust; and many more. I would not like to see this as part of training or assessment of psychotherapy trainees. I see no justification or value in a process such as this .	11/30/2023 5:51 PM
15	Same as above. I believe the therapeutic relationship would not develop effectively. Having the session invasively observed is not genuine therapeutic contact.	11/30/2023 5:20 PM
16	Unworkable as breaches confidentiality. Client may consent, but feel implied pressure to do so. It will inhibit the more complex client issues that emerge from developing trust and safety in the confidential relational mode of psychotherapy. There are not sufficient numbers of experienced psychotherapists to observe. This should be managed in placement out in the community settings eg low cost counselling centres, charities etc. These organisations will have to cease valuable services as they could not possibly provide direct observations.	11/30/2023 4:31 PM
17	The nature of psychotherapy as a "broad church" is well established, assured and supported	11/30/2023 3:42 PM

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by large-scale research. Common factors underpin the effectiveness of therapy while at the same time diversity of approaches enrich the practice of therapy. This interplay of diversity and commonality is part of the rich tapestry of the development of psychotherapy in Ireland and abroad. Diverse yet effective ways of structuring training have emerged in Ireland over the last 75 years. In terms of training placements and particularly placements during psychotherapy studies, diverse yet effective ways of handling placement oversight have arisen. The central role of the enduring therapeutic relationship, trust between people, and the development of a solid working appliance is crucial in effective psychotherapy. Ways of supervising students in their work with service users have been developed, of which live observation behind mirrors or through cameras is only one, and not even the main one. In approaches to psychotherapy that pay particular attention to the therapeutic alliance, the introduction of an observer (whether seen or unseen) is regarded as unhelpfully compromising the therapeutic alliance. In psychotherapy training courses taking a humanistic approach, direct observation is employed, but in skills training with peers rather than with vulnerable clients. Other ways of ensuring quality practice and service user safety have evolved over time and are assured. Close supervision through the presentation of pseudonymized casework to experienced supervisors is an example of this. The introduction of a requirement of 100 hours of directly observed service user contact is restrictive, compromises the evidence-based importance of the therapeutic alliance and, in the proposed form does nothing to ensure service user safety that cannot be achieved by better means. Furthermore, it requires involvement of "observers" at a level that is unsustainable by most placement agencies, who may find themselves having to decline placements.

18	Observation in Supervision: while limited audio supervision is perhaps allowable for beginning counsellors working solely with external life stresses or crises, the presence of a third party in the therapy room is an intrusion into the therapeutic relationship and will have inevitable effects on the therapeutic process. The effectiveness of psychotherapy rests very much on the quality of this relationship.	11/30/2023 1:25 PM
19	Direct observation would go against the philosophy and practice of psychotherapy where the relational dynamics between therapist and client is central to the process and where the unconscious process is engaged with in an intentional way. This work relies on the absolute respect for the one-to-one relationship, conducted with well-articulated boundaries and subject to the code of ethics for the profession. Requiring 100 hours of direct observation, would place an undue burdens on services, students, and clients, and would not lead to any commensurate benefit. Instead it would pose a direct risk to the therapeutic alliance, the therapy process, and the confidentiality that is associated with safe, ethical practice. Directly observing psychotherapy sessions compromises safety for the client, creates an artificial environment, reduces client trust, and impedes the development and maintenance of a therapeutic relationship. It also poses risks for the erosion of the professional experience that clients are currently offered, the centrality of confidentiality within the therapeutic relationship, and the absolute need for psychotherapists to protect the highly sensitive information commonly shared by clients with their psychotherapist; our high ethical standards, and our obligations under GDPR legislation in regard to the use of personal data which is currently protected in regard to the very limited sharing of identifiable data. Contracting with psychotherapy clients includes making a clear agreement re confidentiality, including what is permissible in terms of sharing information with other members of the team (generally an absolute minimum), and the anonymised sharing of information with the clinical supervisor. On-site supervision in placement settings could compromise this as the client may well be known to other members of the team who would not ordinarily be given access to the content of the client session. To be clear, clinical supervision, as currently embedded in training programmes, is a far superior method of assessing the student's clinical practice. This may sometimes include the viewing of segments of clinical practice sessions, notes, etc., but the capacity to assess the student is not dependent on this. The clinical supervisor is an important member of the practice education team and cannot be replaced by on site supervisor who may not be qualified as a clinical supervisor, even if trained by the training body to provide feedback on proficiencies. Each training course has distinct learning outcomes that can only be assessed by the clinical supervisor. Removing the need for clinical supervision will inevitably lead to some training providers reducing or removing this component. We do not know of any other professions, regulated by CORU that have requirements for 'direct observation of service user contact', and if any do exist, what the ethical standards for protecting the client's confidentiality are standard practice in those professions. Psychotherapy is a unique profession in which we deal with highly complex clients for a significant period of time in a confidential space. It is possible for the student to be directly observed in other aspects of their practice placement, e.g., setting up room, managing notes, participating with the team, etc.	11/30/2023 12:36 PM
20	It is imperative that confidentiality is respected in all therapy sessions, with proper	11/30/2023 12:17 PM

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supervision being adhered I don't see the necessity for 100 hours to be directly observed or it would need more detail how this might happen

21	Having a third party sitting in the treatment space; whether in person, online or via video, could interfere with the therapeutic relationship and cause the client to alter their way of being, either by censorship or by trying to 'help' their therapist. Not ideal. Also, where is confidentiality in this?	11/30/2023 11:41 AM
22	This may not be feasible for existing qualified therapist's whom will be grandfathered in and have vast experience as they are already working for years in the profession. Creating a massive amount of therapist's needing to get this completed. However for all newly trained therapist's this would be a good idea.	11/29/2023 5:41 PM
23	I can see how this direct observation could be useful for the student to receive constructive feedback but I wonder how would this be implemented. Having an observer in the room with the student and service user may be off putting for both parties. Carrying this out by audio recording may be less intrusive.	11/29/2023 5:02 PM
24	Regular ongoing supervision is necessary for the profession. As a therapist and supervisor with 25 years experience I am clear of the immense value of regular supervision. It serves as a support for both the client and the therapist. Ensuring a high standard of work is crucial and supervision helps facilitation those standards.	11/29/2023 3:08 PM
25	This ratio of 'directly observed' hours is high and logistically speaking may be very difficult to attain for many students especially those in more rural parts of the country.	11/29/2023 10:25 AM
26	Language confusing - observed service user contact ??	11/28/2023 8:59 PM
27	Not sure what is meant by direct observation. should not impact one on one therapy	11/28/2023 8:02 PM
28	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/28/2023 4:38 PM
29	Directly observed service user contact will disrupt the flow of the session. It could lead to the therapist being unable to rbe 100% congruent with their client and also may give the client a lack of trust in the process. The presence of an observer can be inhibiting and restrictive to the process for both client and student.	11/28/2023 1:32 PM
30	This section is in complete non-compliance with GDPR & the seminal criteria of confidentiality of the clients whole personal history	11/26/2023 10:36 AM
31	Clinical Supervision of placements by suitably trained and accredited clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/24/2023 2:01 PM
32	Same as Q. 59.	11/24/2023 1:36 PM
33	Again this is interesting but what would direct supervision look like and who is doing it again the accepted metric for direct CBp supervision is specifically spelled out in other jurisdictions.	11/24/2023 11:18 AM
34	As above	11/24/2023 9:58 AM
35	CORU requires placement supervisors on-site, of which 100 hours must be directly observable. Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/23/2023 5:52 PM
36	CORU requires placement supervisors on-site, of which 100 hours must be directly observable. Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/23/2023 5:37 PM
37	While video or audio recording of a session, with client consent, provides great learning for the student therapist, it can take both client and therapist a while to adjust to the presence of a recording device. To have a person in the room directly observing or have them in a corner, behind a screen or viewing by way of a two way mirror is invasive and not conducive to a safe environment for the client, the member of the public. Those attending therapy are vulnerable. It is a big step to come to therapy and trust a stranger. Research shows that the development of the therapeutic relationship is what results in the process of therapy being successful, regardless of the therapists modality. To have someone else in the room would be an invasion of the person's space and opportunity to develop the relationship. On another level it is not practical. This person would have to be a qualified therapist or clinical supervisor, or it would not be ethical to have them within earshot of a therapy session. Overall I believe it would be an invasion of the person's privacy and their rights to avail of therapy, as it would interfere with the process to have someone else in the room. Even now, as a qualified therapist, I would not give consent if my therapist asked to have another	11/23/2023 12:53 AM

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person in the room. It would completely change the dynamics and I would not feel safe to engage in the process with someone directly observing. So it is not something that any client should be subjected to.

38	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/22/2023 8:06 PM
39	I take it that this means that the supervisor is in the room or viewing the session through a 2 way mirror. While 100 hours supervision could be provided for a student while working with another student in training, 100 supervision hours in private practice would be very difficult to implement, and very costly and demanding on both student and practitioner.	11/22/2023 7:43 PM
40	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising. Also the language and terminology is not in keeping with the practice of psychotherapy.	11/22/2023 6:44 PM
41	Directly observed supervisions are suitable for areas like family therapy and couples therapy. For individual therapy models classroom based directly observed supervision and close supervision for client hours done would suffice	11/22/2023 5:50 PM
42	I do not feel it is ethical for a clients therapeutic relationship with their trainee therapist to be directly observed as this creates a very different dynamic in the therapeutic relationship with a third party in the room. More appropriate would be the experience of didactic supervision in the training institution, along with clinical supervision by a qualified psychotherapy clinical supervisor	11/22/2023 3:41 PM
43	This is not ethical	11/22/2023 2:11 PM
44	Clinical Supervision of placements by suitably trained clinical supervisors in a variety of settings is much more appropriate for the complexity of issues arising.	11/22/2023 12:58 PM
45	Methods of direct observation in Psychotherapy tend to focus on in-depth analysis of individual cases. One hour of therapy can result in multiple hours of analysis and critique. This model has proved useful in this particular profession, and would need to change radically if 100 hours of direct observation is required. We suggest a requirement of in the region of 50 hours.	11/22/2023 10:42 AM
46	Directly observed brings it into the education and training institute which is not appropriate for the complexity a psychotherapy session. Clinical Supervision of placements in a variety of settings (e.g. low-cost therapy centres) is much more relevant to the complexity of issues arising.	11/20/2023 4:28 PM
47	Same feedback as above. 100 hours of direct service user contact also breaches the confidentiality, the safe space of therapy and the ease of a student's role as a practitioner. Being observed inhibits a practitioner's confidence and ability to do the work, therefore contradicting and disturbing the therapy space, so no real work can be achieved. In many current Psychotherapy training course, 'fishbowls' exercises where students and supervisors observe practice sessions with each other offer an insight to how student practitioners practice within a session. Or alternatively, clients can be invited to offer feedback on their sessions with students.	11/20/2023 4:09 PM
48	In my experience this would prove very challenging in the psychotherapy world. Supervisors are not on site, mine never was when I did my hours on a Thursday evening 5-9 for 3 years! Supervision was off site. There were other professionals around, but not my direct supervisor. I agree it would be preferable, having trained as an OT and had that more hands on supervision, however the third sector operates quite differently.	11/20/2023 3:32 PM
49	I don't consider it a threshold to have any hours directly supervised, meaning the supervisor does not need to observe contact.	11/13/2023 6:03 PM
50	The Supervision must be carried out by a fully qualified External Supervisor.	11/8/2023 5:14 PM
51	How will this work ??	11/8/2023 1:29 PM
52	100 hours of directly observed service user contact may be difficult to implement for ethical reasons. Being observed can strongly alter the client's and the therapist's behaviour. Direct observation therefore can be very difficult to implement.	11/3/2023 1:55 PM
53	in practical terms due to the nature of psychotherapy I think this could be prohibitive to students being able to qualify	10/25/2023 8:23 PM
54	Directly observing psychotherapy sessions may compromise safety for clients. This criterion is extremely concerning.	10/25/2023 4:43 PM
55	This is the most concerning aspect. There is great confusion as to what you consider to be	10/22/2023 12:48 PM

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'service user contact experience' in this aspect of the requirements. If you are including planning psychotherapy sessions, completion of records and reports, admin duties, engaging with team members, organising sessions, and demonstration of generic proficiencies (e.g. on the phone) then these aspects may be directly observed - but not for 100 hours! If you are referring to actual psychotherapy sessions, this would compromise client safety and hamper the therapy process. Your FAQ's are confusing in this regard as the only options offered as potential methodologies suggest direct observation of clinical sessions with clients (sitting in, co-therapy, two-way mirrors, video/audio recording, and verbatim transcription). If performed by anyone other than the clinical supervisor, these 5 options could constitute a breach of the confidentiality that currently exists between client and therapist. The only ethical way for 'direct observation' to be used is to ensure identifying information is not shared and for the clinical supervisor, and/or other members of the practice education team, to review e.g. recordings for purposes of student assessment (formative and summative). Therefore, if any direct observation is to be required, I would suggest that it be reserved for the more generic aspects of practice and any direct observation of actual client sessions be severely cut back and restricted to the practice education team and clinical supervisor.

56

consider this one to be EXTREMELY problematic, including the impact of not requiring ANY clinical supervision (see responses to Qs 64-66 below). is very concerned by the proposed erosion of the professional experience that clients are currently offered, the centrality of confidentiality within the therapeutic relationship, and the absolute need for psychotherapists to protect the highly sensitive information commonly shared by clients with their psychotherapist; our high ethical standards, and our obligations under GDPR legislation in regard to the use of personal data which is currently protected in regard to the very limited sharing of identifiable data. The draft criteria which relate to clinical practice, including the requirement for direct observation, would require those who work and train in the field to compromise their high ethical standards and impinge on the current high standards offered to clients by both graduates, and students on level 9 training courses. • do not believe that a requirement for 100 'directly observed service user contact hours' is feasible, useful, ethical, or practical. Directly observing psychotherapy sessions compromises safety for the client, creates an artificial environment, reduces client trust, and impedes the development and maintenance of a therapeutic relationship. • We do not know of any other professions, regulated by CORU (perhaps they do exist?), that have requirements for 'direct observation of service user contact', and if any do exist, what the ethical standards for protecting the client's confidentiality are standard practice in those professions. • Contracting with psychotherapy clients includes making a clear agreement re confidentiality, including what is permissible in terms of sharing information with other members of the team (generally an absolute minimum), and the anonymised sharing of information with the clinical supervisor. GDPR requirements also guide the practitioner in sharing the minimum amount of sensitive personal data. The amount of sharing of personal data that seems to be envisaged in these drafts does not seem to be justifiable in terms of the client's best interest. We are there to serve the client – not the reverse! • The clinical supervisor is an important member of the practice education team and cannot be replaced by an onsite supervisor who may not be qualified as a clinical supervisor, even if trained by the training body to provide feedback on proficiencies. Removing the need for clinical supervision will inevitably lead to some training providers reducing or removing this component – a race to the bottom scenario is possible. • Direct observation of the therapist in session with the client goes completely against the confidentiality that is associated with counselling and psychotherapy. It is possible for the student to be directly observed in other aspects of their practice placement ... e.g. setting up room, managing notes, participating with the team etc. • For comparison: some Master's level Social work training requires 8 directly observed sessions (4 being of 10-minute duration, and the other 4 being for part of a session). In total, this would amount to less than 3 hours – far below the 100 hours being proposed for psychotherapists. To conclude, we do not believe that direct observation of live sessions is appropriate if it involves an additional person to be in the room with the client and therapist, unless it is a co-facilitated session and that co-facilitation is part of the treatment plan for the client's benefit. We do not agree with direct observation of a session where a student is in sole practice with a client. We see this as a breach of confidentiality that presents an artificial situation which lacks authenticity, assessment would not be accurate and the therapeutic relationship may be harmed. However, we do believe that it is very important for the CLINICAL supervisor, and relevant members of the practice education team, to view video recordings of part of clinical practice sessions both for the purpose of formative and summative assessment. Psychotherapy students do not need a supervisor onsite: they need a person, not necessarily a psychotherapist, associated with the service to facilitate their placement and provide guidance, support and formative feedback to them. This person may also have an important role in providing feedback to the training organisation. They may monitor and provide feedback on how they see the student develop and progressively demonstrate various competencies regarding e.g., professional

10/21/2023 6:41 PM

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relationships, their participation in the team, adherence to centre policies, reliability, respect confidentiality, storage of records, maintenance of therapy room etc. As CORU continually say, many of the proficiencies you require are generic across professions so students could realistically be monitored and acquire useful learning from other CORU registrants and other relevant professionals onsite.

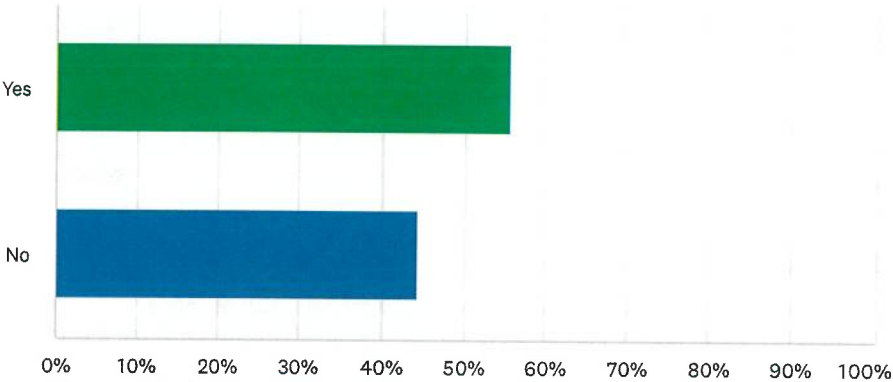
57	I think it need to be regulated how many direct supervision hours (watching the sessions) need to get each student and hours of guides on a placement	10/21/2023 6:17 PM
58	The criterion for 100 hours to be directly observed is prudent, as it ensures that students are not just participating but are also being evaluated in real-time. This component adds an additional layer of quality assurance and is instrumental in the early identification of any competencies that may require further development (Watkins, 2014). However, Not sure how the therapeutic relationship could develop with a 3rd party in the room	10/20/2023 3:04 PM
59	This is an unrealistic threshold and will make it very difficult for trainees to be able to carry out their placement hours	10/18/2023 10:34 PM
60	Directly observed contact hours is an extreme invasion of client confidentiality. There is also no specification for clinical supervision. The supervised directly observed hours by a psychotherapist, cannot meet the same high level of standards as clinical supervision by a trained clinical supervisor.	10/18/2023 12:15 PM
61	Students are not allowed to be paid for their clinical work while in training. However, supervisors charge up to 70per hour for supervision. 100 hours being directly observed means an added cost of €7,000 to the trainee on top of an already very expensive course. The student is already paying their course fees, upward of €16,000 for a level 8, their personal therapy, group supervision, their insurance and their governing body fees, If the course providers have fully trained supervisors ready to offer their services free of charge to students by all means make this a threshold. Sufficient supervision by trained supervisors could be given in the colleges whilst in triad training.	10/6/2023 1:52 PM
62	There will be major capacity issues trying to do this within existing services in industry	10/5/2023 5:13 PM
63	it's not clear what direct supervision means in context	10/3/2023 11:01 AM
64	As above	9/22/2023 5:44 PM
65	It is unclear what this means - as in, having someone watch while you work with a client in practice? I would have grave concerns about this. Perhaps this can be done during college e.g. peer work?	9/14/2023 1:49 PM
66	In order to directly observe client sessions, a 2 way mirror, video or presence is required. These facilities are rarely available in non state funded training scenarios. Psychotherapists own video could be utilised with client permission, as an assessment tool. But 100 hrs is excessive.	9/14/2023 8:11 AM
67	Keep in line with other European countries standards	9/13/2023 8:36 PM
68	This is very high and maybe difficult to get service users to agree with. I do agree that some observations or recordings are necessary to ensure client safety. Possibly 50 hours is more reachable.	9/13/2023 4:59 PM
69	Direct observation by the clinical/on-site supervisor of the actual therapeutic work may be difficult. Two way mirrors are certainly not available in most placement settings and audio or video recordings bring up ethical/GDPR implications. When I did my clinical placement in CAMHS many years ago my supervisor sat in on all my review meetings, which involved parent/carer and child, but not on my actual individual psychotherapy sessions. I was expected to keep detailed notes of the one to one work and these, along side my verbal accounts were how assessed my progress.	9/10/2023 12:40 PM
70	100 hours is too much	9/8/2023 2:45 PM
71	impracticable in most training, students usually submit videos and extracts rather than be directly observed	9/7/2023 12:29 PM
72	Again I'm not sure I fully understand. Is that 100 hours with a service user plus an observer in the room? I'm not sure how that would work in terms of therapeutic relationship etc.	9/6/2023 6:37 PM
73	This may be difficult to establish in many placement settings and could be too restrictive. Perhaps 'recorded' rather than 'directly observed' would be more practical	9/6/2023 6:31 PM
74	How is this to be facilitated and by who. Consider impact on availability of student placement opportunities	9/5/2023 6:31 PM

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75	direct observation is critical in assessing therapists suitability. (Psychotherapists)	9/5/2023 3:55 PM
76	To personal to have direct observations	9/5/2023 12:12 AM

Q64 Do you consider there to be omissions from the profession-specific criteria?

Answered: 106 Skipped: 322



ANSWER CHOICES		RESPONSES	
Yes		55.66%	59
No		44.34%	47
TOTAL			106

Q65 Please fill in the boxes below if you consider there to be an omission

Answered: 58 Skipped: 370

ANSWER CHOICES	RESPONSES	
Suggested Omission	98.28%	57
Proposed wording to rectify omission	67.24%	39
Rationale for Comment	89.66%	52

#	SUGGESTED OMISSION	DATE
1	An essential component of training in the psychotherapy models such as those psychoanalytically based require the trainee to undergo personal experience of the therapy.	12/1/2023 4:50 PM
2	Clinical Supervision is a critical component of Systemic Psychotherapy training	12/1/2023 4:36 PM
3	Personal Therapy	12/1/2023 3:53 PM
4	Module content of courses	12/1/2023 2:49 PM
5	Requirement for personal therapy to be included	12/1/2023 12:29 PM
6	The need for personal therapy.	12/1/2023 11:25 AM
7	Public Safety	12/1/2023 9:15 AM
8	There is no requirement for Personal Therapy for entry to the register which is of huge concern.	12/1/2023 6:26 AM
9	Placement manager and clinical supervisor should be distinct and separately defined and protected.	12/1/2023 2:00 AM
10	Personal Therapy	11/30/2023 8:10 PM
11	Personal Psychotherapeutic Experience (Personal Therapy)	11/30/2023 6:10 PM
12	omission of course ownership of the supervision function on student placements	11/30/2023 4:22 PM
13	Need to attend a minimum number of hours of personal therapy	11/30/2023 4:01 PM
14	Personal psychotherapy as part of personal development	11/30/2023 1:31 PM
15	Clinical Supervision Requirements	11/30/2023 12:39 PM
16	Personal Therapy	11/30/2023 12:21 PM
17	There appears to be no requirement for clinical supervision for entry to the register. With the suggestion that supervision takes place on site.	11/30/2023 11:42 AM
18	Requirement for personal therapy	11/29/2023 3:14 PM
19	The criteria is too limiting.	11/29/2023 10:31 AM
20	Requirement for Personal therapy omitted	11/28/2023 9:06 PM
21	No requirement for personal therapy for registration	11/28/2023 8:06 PM
22	Adequate Requirement for group process and personal work during training	11/28/2023 6:43 PM
23	Requirement for personal therapy	11/28/2023 4:43 PM
24	Have personally undergone a minimum of 250 hours of Psychotherapy. Must have been An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 10:52 AM
25	Personal Therapy	11/24/2023 2:07 PM
26	Personal therapy in Training.	11/24/2023 1:57 PM
27	Lack of personal therapy	11/24/2023 9:59 AM

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28	personal therapy requirement	11/23/2023 8:00 PM
29	An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions	11/23/2023 5:56 PM
30	No requirement for Personal Therapy for entry to the Register	11/23/2023 5:40 PM
31	There is no set requirement for personal therapy	11/23/2023 1:00 AM
32	not enough personal therapy	11/22/2023 8:08 PM
33	The must be requirement for regular ongoing personal therapy during training	11/22/2023 6:48 PM
34	Need for personal therapy experience	11/22/2023 5:57 PM
35	Need for own psychotherapy / personal therapy experience	11/22/2023 3:57 PM
36	Personal Therapy	11/22/2023 1:00 PM
37	No requirement for Personal Therapy	11/20/2023 4:29 PM
38	Mandated personal therapy for student Psychotherapists.	11/20/2023 4:14 PM
39	The qualification of the clinical supervisor.	11/13/2023 6:07 PM
40	100 hours of Personal Therapy for 4 year training need to be completed.	11/8/2023 5:16 PM
41	As already mentioned in previous comments	11/8/2023 1:30 PM
42	Direct face-to-face service delivery	11/3/2023 1:56 PM
43	The standards of proficiency from 5.1 to 5.32 do not reflect differentiation between the practice of psychotherapy and counselling.	10/26/2023 8:25 PM
44	Education	10/25/2023 5:14 PM
45	Duration of Training	10/25/2023 4:48 PM
46	Personal Therapy	10/22/2023 12:48 PM
47	Personal Psychotherapy Experience: We see a gap in including a need for engagement in personal psychotherapeutic experience which is concerning, both in the regulations, and in the formulation of the proficiencies which do not adequately present how personal learning from own therapy process informs the practice of the psychotherapist and provides safety for the client.	10/21/2023 6:44 PM
48	trauma informed approach	10/20/2023 9:19 PM
49	Required personal therapy	10/18/2023 10:36 PM
50	Minimum requirement of personal therapy needs to be included	10/18/2023 5:05 PM
51	Personal Psychotherapy	10/18/2023 12:29 PM
52	Personal therapy	10/11/2023 11:04 PM
53	not omissions but additions	10/3/2023 11:55 AM
54	Personal Therapy	9/15/2023 1:47 PM
55	Training institutions	9/14/2023 8:18 AM
56	keeping the standards up to other European countries	9/13/2023 8:39 PM
57	Students must complete a mandatory 60 hours of personal therapy over the duration of the course with the aim of being in continuous weekly therapy	9/13/2023 5:06 PM
#	PROPOSED WORDING TO RECTIFY OMISSION	DATE
1	Clinical Supervision should be integral to the training of a Psychotherapist	12/1/2023 4:36 PM
2	That Psychotherapists in training would undertake 30 hours of Personal Therapy per year of training.	12/1/2023 3:53 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

3	Course must include these core modules (list) and a number of electives	12/1/2023 2:49 PM
4	There is a need for psychotherapists in their training to engage in personal therapy.	12/1/2023 11:25 AM
5	At Level 8 training there is a danger that there may be a lack of integration of clinical supervision and personal psychotherapeutic experience to ensure public safety.	12/1/2023 9:15 AM
6	Students are required to complete 250 hours one-to-one therapy and group therapy	11/30/2023 8:10 PM
7	Personal Psychotherapeutic Experience , or equivalent : (not less than 250 hours : EAP Standards for training).	11/30/2023 6:10 PM
8	The removal of reference to on-site supervision and its replacement by reference to on-site casework oversight by the placement agency, and supervision by supervisors who have expertise in supervision of student psychotherapists	11/30/2023 4:22 PM
9	Students must attend a minimum of 200 hours personal therapy	11/30/2023 4:01 PM
10	Requirement of minimum 250 hours of personal therapy during training	11/30/2023 1:31 PM
11	We suggest that Criterion 2.10 and 2.15 in regard to practice placements (Criteria for Education and Training Providers) would be strengthened by the addition of the word 'clinical' before 'supervision' in both cases, as follows. Criterion 2.10: While on placement, appropriate support, guidance and clinical supervision is maintained with the student by the practice education team. Criterion: 2.15: Clinical supervision policies include guidelines on how students progressively achieve independence in practice. We propose that the manner of implementing Criterion 2.2 be revised to ensure that: a. The title and role of the 'Placement Supervisor' be amended to that of Placement Manager or Mentor, and that criteria for their suitability be widened to include other professionals than psychotherapists who can provide professional support and guidance to the student, and provide feedback to the practice education team in regard to generic standards of proficiency achieved. b. That supervision in regard to direct contact with clients be provided by an external clinical supervisor, who need not be onsite, and who will assess profession-specific standards of proficiency and will communicate directly with the practice education team.	11/30/2023 12:39 PM
12	Personal Therapy should be a requirement of all training for psychotherapist adhering to EAP standards	11/30/2023 12:21 PM
13	Students and Pre-Accredited and Accredited Psychotherapists will be obligated to attend Clinical Supervision as part of their professional indemnity. The ratio of supervision to client hours will be dependant on level of experience.	11/30/2023 11:42 AM
14	All students of psychotherapy must complete a minimum of 100 hours of personal therapy	11/29/2023 3:14 PM
15	Experiential understanding of the therapeutic process is fundamental to training.	11/28/2023 9:06 PM
16	Each therapist must complete a minimum of 100 hours of personal therapy	11/28/2023 8:06 PM
17	That therapists must have personally undergone a minimum of 250 hours of Psychotherapy. An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 10:52 AM
18	24 hours (minimum) personal therapy for each year of training.	11/24/2023 1:57 PM
19	Personal therapy is invaluable learning for Psychotherapy training	11/23/2023 5:56 PM
20	Students need to attend personal therapy	11/23/2023 1:00 AM
21	There must be a minimum of 250 hours of personal therapy including a minimum of 60 hours of group therapy	11/22/2023 6:48 PM
22	At least 250 hours of personal therapy experience must be gained before accreditation	11/22/2023 5:57 PM
23	250 hours of personal therapy including a minimum of 60 hours group Psychotherapy, which engages and explores one's own process in a group.	11/20/2023 4:29 PM
24	2.2 The programme must ensure that each student attends weekly personal therapy sessions for at least 3 years of their programme.	11/20/2023 4:14 PM
25	The supervisor must have a specialized qualification as a psychotherapist in clinical supervision.	11/13/2023 6:07 PM
26	100 hours of Personal Therapy need to be completed.	11/8/2023 5:16 PM
27	Means of service delivery	11/3/2023 1:56 PM
28	Identify differentiation between the counsellors and psychotherapists other than the additional 50 hours of service user contact experience and the additional 25 hours of EAP directly	10/26/2023 8:25 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes
(Psychotherapists)
observed service user contact for psychotherapists.

29	Level 9	10/25/2023 5:14 PM
30	European requirements are for a 4 year postgraduate level psychotherapy specific training	10/25/2023 4:48 PM
31	I would like to have a requirement for personal psychotherapeutic experience embedded in the criteria and in the proficiencies.	10/22/2023 12:48 PM
32	1. We would like to have a requirement for personal psychotherapeutic experience mandated, and/or 2. have proficiencies included (both in Professional Development and in Professional Knowledge and Skills sections) that are directly linked to the contribution such engagement ensures for the student. We have suggested some revisions above (Q.53 and Q.55)	10/21/2023 6:44 PM
33	therapist should demonstrate solid awareness of a TIA and be trained in at least one evidence based model for facilitating the processing of traumatic experience	10/20/2023 9:19 PM
34	A minimum number of hours personal therapy should be completed during training	10/18/2023 5:05 PM
35	Personal Psychotherapy	10/18/2023 12:29 PM
36	Students must undergo a sufficient amount of personal therapy during their training in order to work through their personal issues including bringing their unconscious dynamics into their awareness.	10/11/2023 11:04 PM
37	addition: need for mandatory personal therapy, need for mandatory supervision by a trained supervisor	10/3/2023 11:55 AM
38	Personal therapy 30-40 hour per year required	9/15/2023 1:47 PM
39	Training institutions to be consistently monitored by regulatory bodies. Quality reviews to be completed regularly.	9/14/2023 8:18 AM
#	RATIONALE FOR COMMENT	DATE
1	To practice the subjective nature of therapy it is important for the trainee to be aware of their conscious and unconscious mental dynamics to protect their clients and themselves.	12/1/2023 4:50 PM
2	Trainees develop competence over the years of training and therefore need clinical supervision throughout training	12/1/2023 4:36 PM
3	The Psychotherapist cannot work at depth with the person if they themselves have not worked at depth within their own process. Such work becomes evident in the Trainee Psychotherapists work within their academic training, in their client work and in supervision	12/1/2023 3:53 PM
4	To ensure adequate academic knowledge.	12/1/2023 2:49 PM
5	Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions	12/1/2023 12:29 PM
6	CORU's rationale is that personal therapy is not something that can be assessed. An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	12/1/2023 11:52 AM
7	The dept of training currently is level 9 this is compliant across UK and Europe. It need to remain at this level for public safety.	12/1/2023 9:15 AM
8	An experiential understanding of the therapeutic process is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal therapy including a minimum of 60 hours group psychotherapy for accreditation. Personal therapy is already required in the many state recognised psychotherapy courses in Ireland and other jurisdictions.	12/1/2023 6:26 AM
9	Therapy is required so the student can become more self-aware and work through their own history. Also it give them an experiential understanding of the therapeutic process. Just because it cannot be assessed is not a reason to exclude. Its an experience a psychotherapist should have.	11/30/2023 8:10 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

10	Personal Psychotherapeutic Experience , or equivalent : (not less than 250 hours : EAP Standards for training) It is required that learners are in their own personal psychotherapy contemporaneously while undertaking a training programme in Psychotherapy. Personal psychotherapy will need to be humanistic / integrative / psychodynamic and therefore comprises of weekly sessions. In some modalities more weekly sessions may be required . This Personal Psychotherapeutic Experience, or equivalent, has been proven as one of the most valuable aspects of one's foundation as a therapist and is clearly delineated in the EAP standards for training as a psychotherapist : (see section 4.2.1 of the EAP The European Certificate of Psychotherapy document).	11/30/2023 6:10 PM
11	close supervision of placement practice by course supervisors with expertise in the the development of in-training psychotherapists is established and assured as a psychotherapy standard, both nationally and internationally. Close co-operation between in-course supervisors and placement case managers in their various forms is also established practice. Most placements have case management and oversight processes in place. Case managers may not have the expertise to properly scaffold the learning-in-practice that is required for safe student practice with vulnerable service users. The proposed alternative wording allows for either on-site or in-course supervision and also requires on-site casework oversight that ensures service user safety.	11/30/2023 4:22 PM
12	Many of core skills outlined including skills 11, 16, 20, 21, 24, 25, 28 and 29 can only be developed and honed through the experience of personal therapy.	11/30/2023 4:01 PM
13	. the psychotheapist needs maturity and self-awareness-a different but essential kind of 'education' For a practising psychotherapist to be able to adequately engage with the unconscious dynamics in the therapeutic relationship, s/he needs to be aware of her/his own unconscious experience, blind spots and biases.	11/30/2023 1:31 PM
14	Clinical supervision is a critically important part of the training and clinical practice of the psychotherapist, it should be integral to the training programme, and criteria for this has been omitted from the draft. The failure to recognise this suggests a total misunderstanding about the context in which ethical training and clinical practice occur. The clinical supervisor is an important member of the practice education team and cannot be replaced by an onsite supervisor who may not be qualified as a clinical supervisor, even if trained by the training body to provide feedback on proficiencies. Each psychotherapy training course has distinct learning outcomes that can only be assessed by the clinical supervisor. Removing the current requirement for clinical supervision will inevitably lead to some training providers reducing or removing this component and would result in a very unsafe environment for clients, students, and qualified psychotherapists.	11/30/2023 12:39 PM
15	It is imperative that EAP standards for Personal Therapy requirements are adhered to in training for Psychotherapists. This is the only way that we can truly protect clients who come to therapy, that a therapist through their own process has become aware of blind spots, prejudices, raised awareness, steadiness and a thorough understanding of the psychotherapeutic process	11/30/2023 12:21 PM
16	Clinical supervision is fundamental to the development of the therapist; the safety & wellbeing of the client; and overall maintaining high standards of the profession of Psychotherapy. Having an external supervisor allows for that individual to freely present any ongoing dilemmas or issues presenting. In the event a practice manager is the supervisor, then it is likely the supervisee will censor/curate what they bring to supervision.	11/30/2023 11:42 AM
17	To omit the need for personal therapy work is quite the most absurd proposal I can imagine. It is imperative that a person working with people have travelled the same road themselves. A trainee's own personal therapy work is a very significant part of the learning curve for the profession. There is a saying in the therapy world that you can only take a client as far as you have travelled yourself. Without a therapist doing their own personal work that won't be very far.	11/29/2023 3:14 PM
18	At no point is the issue of 'derogation' referenced. It is clear there are many professionals who come to the field of psychotherapy from non-traditional routes. These individuals have last experience in akin disciplines but are not recognised.	11/29/2023 10:31 AM
19	Personal therapy is necessary for anyone who wishes to work as a therapist to better understand themselves and the transference and counter-transference that unfolds in the therapeutic process.	11/28/2023 9:06 PM
20	To be a professional therapist, personal therapy is essential both as experiential and getting to know ones own triggers. EU standards we must aim for nothing less	11/28/2023 8:06 PM
21	An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal	11/28/2023 4:43 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.

22	To insure that therapist have the minimum requirements to be able to insure the safety, security of members of the public & be able to distinguish there own process & difficulties form the client. And must engage in regular monthly clinical supervision to be able to have minimum proficient of competency in their clinical practice - An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	11/26/2023 10:52 AM
23	Not requiring extensive personal therapy for a trainee psychotherapist is a matter of grave concern. An absence of personal therapy for the trainee therapist poses safety issues for both therapist and client. It is only through extensive personal therapy that a trainee therapist will learn to recognise and manage their own personal process as separate and distinct from the clients, and to recognise subtle, non verbal communication, such as countertransference. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	11/24/2023 2:07 PM
24	No criteria for undertaking personal therapy in training is an obvious and blatant ommission from this document. For the student to understand the therapeutic relation ship fully personal therapy is essential and ensures client safety.	11/24/2023 1:57 PM
25	Given the complexity of the work, the impact on the therapist and the vulnerability of client groups, personal therapy is essential. It is also essential for reflective practice.	11/23/2023 8:00 PM
26	This is a grave omission if it were to go ahead. It is absolutely essential that Psychotherapy training involves the level of personal Psychotherapy currently mandated by IAHIPPsychotherapy	11/23/2023 5:56 PM
27	CORU's rationale is that personal therapy is not something that can be assessed. An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	11/23/2023 5:40 PM
28	To sit with people and not have worked on your own personal issues, will lead to the boundaries being blurred and a risk of the therapist seeing what is theirs and what is the clients, resulting in therapist issues interfering or merging with those of the client.	11/23/2023 1:00 AM
29	An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	11/22/2023 8:08 PM
30	An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safetyPersonal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions..	11/22/2023 6:48 PM
31	It is highly important to develop skill of managing transference relationship between client and therapist	11/22/2023 5:57 PM
32	Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety.	11/22/2023 3:57 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

33	Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	11/22/2023 1:00 PM
34	It is critical for the safety of clients that Psychotherapists have undergone their own personal therapy in order to fully understand the psychotherapeutic process. This gives the opportunity to recognise and work through the therapists own unresolved issues which may otherwise interfere in therapy via transference and countertransference.	11/20/2023 4:29 PM
35	Psychotherapy is very personal work for the practitioner, where a practitioner is asked to and should bring their real authentic selves into the work. A practitioner cannot possible do so if they have addressed and done the personal work themselves. A therapist cannot sit with a client, if they not have not sat in the client's chair and undergone the full personal experience themselves. Without the experience of personal therapy, therapists may be not fully understand the theory they are trying to apply and may be ingenuine in their work. Personal therapy also enables practitioners to be aware of themselves and therefore know how to self-care and prevent burnout or vicarious trauma in the work.	11/20/2023 4:14 PM
36	The clinical supervisor need to be if the same profession and appropriately qualified in clinical supervision to mentor, monitor, and hold professional standards.	11/13/2023 6:07 PM
37	Therapists will not have worked through their own wounding/trauma if sufficient Personal Therapy hours have not been completed.	11/8/2023 5:16 PM
38	The requirements should not be only face-to-face/ in-person. That is an outdated and unattainable standard for a large number of people. Online service delivery should be recognised, both in client hours and in supervision hours.	11/3/2023 1:56 PM
39	CORU proposals are to regulate for distinct professional disciplines (counsellors and psychotherapists), however the standards and proficiencies overlap as we see it.	10/26/2023 8:25 PM
40	To protect and uphold safe, ethical and best practice in the field of psychotherapy	10/25/2023 4:48 PM
41	This is a pillar of current psychotherapy training in Ireland and throughout Europe and further afield.	10/22/2023 12:48 PM
42	To protect public safety and recognise the centrality of this aspect in psychotherapy as currently self-regulated and practiced. Not stipulating any requirements for personal therapy during training will result in some training programmes removing or reducing this requirement and lead to very poorly trained psychotherapists who will lack the personal development traditionally associated with the field, and will not have sufficient competence for safe practice. As training providers we can directly observe the impact of personal therapy on the developing competence and maturity of our students throughout their 4 year training period.	10/21/2023 6:44 PM
43	a TIA is embedded within a Strategy for Change- Service principles	10/20/2023 9:19 PM
44	All trainees should be required to undergo their own personal therapy	10/18/2023 10:36 PM
45	Personal therapy needs to be a requirement in order to ensure therapist are not bringing their own personal experiences into the therapeutic space	10/18/2023 5:05 PM
46	This was one of the most important parts of my training as a psychotherapist. Personal therapy is essential for personal development and for providing safe and effective psychotherapy to clients.	10/18/2023 12:29 PM
47	This is crucial to work professionally and ethically.	10/11/2023 11:04 PM
48	the standard of care to clients cannot be downregulated. The achieved standard of care needs to be upheld	10/3/2023 11:55 AM
49	Personal therapy is required to process own issues and to understand what it is like to be a client	9/15/2023 1:47 PM
50	Training institutions, especially privately run institutions, should be closely monitored to ensure standards are kept and training practices meet EDII criteria and safety standards re CAMS training.	9/14/2023 8:18 AM
51	not to leave public at risk	9/13/2023 8:39 PM
52	Inclusion of compulsory therapy. It is not safe to have therapists who are not in therapy themselves. include specific amount of hours such as 60-80 hours over the	9/13/2023 5:06 PM

Q66 Please fill in the boxes below if you consider there to be an omission

Answered: 22 Skipped: 406

ANSWER CHOICES	RESPONSES	
Suggested Omission	100.00%	22
Proposed wording to rectify omission	77.27%	17
Rationale for Comment	81.82%	18

#	SUGGESTED OMISSION	DATE
1	The Clinical Supervisor is a critical part of the practice education team	12/1/2023 4:36 PM
2	Experiential Group Process	12/1/2023 3:53 PM
3	Lack of definition of Psychotherapy and the recognition of it as a Distinct profession.	12/1/2023 9:15 AM
4	Training should be at postgraduate level, minimum of 4 years and have been proceeded by a relevant undergrad degree or REPL.	12/1/2023 2:00 AM
5	Group Process/Group experiential learning	11/30/2023 6:10 PM
6	pathways to entry to the profession that are inclusive	11/30/2023 4:22 PM
7	Setting a specified minimum duration of training	11/30/2023 12:39 PM
8	No requirement for Personal Therapy for entry tot he register.	11/30/2023 11:42 AM
9	Requirement for Supervision omitted	11/28/2023 9:06 PM
10	Omissions are · Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). · Have personally undergone a minimum of 250 hours of Psychotherapy. · An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 10:52 AM
11	Experiential Group Process in Training	11/24/2023 1:57 PM
12	Ongoing clinical supervision is necessary	11/23/2023 1:00 AM
13	Need for acquiring group therapy experience	11/22/2023 5:57 PM
14	The training for psychotherapists shall be at postgraduate masters or masters' equivalent level and is understood to be a specialist level of training.	11/22/2023 3:57 PM
15	External Clinical Supervision must be undertaken	11/8/2023 5:16 PM
16	Clinical Supervision	10/25/2023 4:48 PM
17	Clinical Supervision	10/22/2023 12:48 PM
18	Clinical Supervision: Clinical supervision is a critically important part of the training and clinical practice of the psychotherapist and criteria for this has been omitted from the draft. The failure to recognise this suggests a total misunderstanding about the context in which ethical training and clinical practice occur.	10/21/2023 6:44 PM
19	Required superbision	10/18/2023 10:36 PM
20	Minimum number of group therapy hours to be completed during training	10/18/2023 5:05 PM
21	Clinical supervision	10/18/2023 12:29 PM
22	Group therapy	9/13/2023 5:06 PM
#	PROPOSED WORDING TO RECTIFY OMISSION	DATE
1	That the Psychotherapist in Training would undergo 2 hours group process on each week of academic training	12/1/2023 3:53 PM
2	Psychotherapy is a deeper and more long term approach than counselling. THis need to be recognised and the distinction proposed does not adequately reflect this fact.	12/1/2023 9:15 AM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes
(Psychotherapists)

3	A minimum of 60 hours of Group Process work /Group Therapy work as mandatory ; distinction between counselling and psychotherapy training .	11/30/2023 6:10 PM
4	We propose this might be addressed by a stipulation in regard to the duration of training as allowed for within Clause 25 of the Directive of the European Parliament and of the Council of 28th June 2018 on a proportionality test before adoption of new regulation of professions which states: "Where relevant in view of the nature and the content of the measure being analysed, Member States should also take the following elements into account: the connection between the scope of professional activities covered by a profession and the professional qualification required; the complexity of the tasks in particular as regards the level, the nature and the duration of the training or experience required; the existence of different routes to obtain the professional qualification; whether the activities reserved to certain professionals can be shared with other professionals; and the degree of autonomy in exercising a regulated profession in particular where the activities relating to a regulated profession are pursued under the control and responsibility of a duly qualified professional."	11/30/2023 12:39 PM
5	Each student psychotherapist is required to undertake personal therapy for the final two years of their training. This ought to be on a weekly basis. No less than 50 personal therapy sessions ought to be undertaken and, unless in exceptional circumstances, the student remains working with the same therapist.	11/30/2023 11:42 AM
6	Supervision is a fundamental requirement for safe, ethical, therapeutic practice	11/28/2023 9:06 PM
7	Therapists must achieve · Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). · Have personally undergone a minimum of 250 hours of Psychotherapy. · An appropriately trained and qualified supervisor must have supervised their training.	11/26/2023 10:52 AM
8	18 hours (minimum) for each year of training.	11/24/2023 1:57 PM
9	Students need to attend clinical supervision	11/23/2023 1:00 AM
10	60 hours group therapy experience needed	11/22/2023 5:57 PM
11	Sufficient External Clinical Supervision must be undertaken with a fully qualified Supervisor	11/8/2023 5:16 PM
12	Clinical Supervision needs to be clarified throughout	10/25/2023 4:48 PM
13	Add 'clinical' in proficiencies where supervision is mentioned and add 'active engagement in' where possible. Also add requirement for clinical supervision into Criterion 2 regarding Practice Placements.	10/22/2023 12:48 PM
14	We suggest that Criterion 2.10 and 2.15 in regard to practice placements (Criteria for Education and Training Providers) would be strengthened by the addition of the word 'clinical' before 'supervision' in both cases.	10/21/2023 6:44 PM
15	Minimum number of group work hours to be completed	10/18/2023 5:05 PM
16	Clinical supervision	10/18/2023 12:29 PM
17	Student should attend a minimum hours of 50 hours of group therapy	9/13/2023 5:06 PM
#	RATIONALE FOR COMMENT	DATE
1	Experiential group training is an essential space for therapeutic personal growth and especially so in the interactional dynamics of the group process. Both Personal Therapy and Experiential Group Process are essential to developing safety as a Psychotherapist and thus supporting the safety of the person who seeks psychotherapy	12/1/2023 3:53 PM
2	Group Process/ or Group experiential learning is a fundamental part of training in humanistic / integrative / psychodynamic psychotherapy. It has a crucial function in providing learners with the challenge to articulate in a group context the issues that arise over the duration of the training programme. Formats such as weekly Process groups constitute an indispensable component for personal development. It is essential during training to engage in a group process to provide learners/trainees with appropriate facilities in which to deepen their understanding of themselves, their relationships and of others, and to encourage self-reflection.	11/30/2023 6:10 PM
3	Placing the threshold for registration as a psychotherapist at NFQ level 9 is aligned with the European commitment to create progressive pathways through the education levels. Most psychotherapy students have completed level 8 studies in related fields and some have completed level 9 studies in analogous fields. It is possible for a person to undertake post-leaving cert studies, leading to diplomas and level 8 degrees, and then on to masters studies in psychotherapy. Recognition of prior learning and equivalent experience also makes it possible for suitable candidates to enter psychotherapy courses directly. Setting	11/30/2023 4:22 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

(Psychotherapists)
the threshold level for psychotherapy registration is not intended to be restrictive, it arises only because of the learning outcomes, proficiencies and professional attributes required of the psychotherapist in order to practice psychotherapy safely.

4	It is our contention that a minimum period of 4 years' postgraduate study is required to provide adequate time for personal development and skills development prior to placement; allowing time to integrate learning, and facilitate a progressive approach to clinical practice.	11/30/2023 12:39 PM
5	An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety.	11/30/2023 11:42 AM
6	Supervision is a fundamental requirement for safe, ethical, therapeutic practice.	11/28/2023 9:06 PM
7	All of the above is mandatory from the perspective of Sound Robust Medical Ethical practice & the minimum capacity to the psychotherapists to be able to manage suicidality self-harming behaviours & be able to address the welfare of children, vulnerable adults & the general well being of members of the public. An experiential understanding of the therapeutic process such as therapist countertransference is an important component of training. Not requiring extensive personal therapy for a trainee psychotherapist is a fundamental misunderstanding of the psychotherapeutic relationship and client safety. IAHIP requires 250 hours of personal psychotherapy including a minimum of 60 hours of group psychotherapy for accreditation. Personal therapy is already required in the many state-recognised psychotherapy courses in Ireland and other jurisdictions.	11/26/2023 10:52 AM
8	Group process gives students the opportunity to understand by experiencing some of the key concepts necessary to recognise in the client/therapist relationship i.e. projection, transference, countertransference, manipulation, defensive strategies. It helps to develop compassion in the therapist. It also helps the therapist to see we are all wounded to some degree.	11/24/2023 1:57 PM
9	To inform their practice clinical supervision, not supervision from a person who is not qualified in psychotherapy. There seems to be a requirement to be able to articulate the need for supervision, but not a requirement for ongoing supervision	11/23/2023 1:00 AM
10	It is vital to gain this knowledge of group dynamics to be aware of clients' experience as well as therapists' experience in order to avoid any judgemental approaches	11/22/2023 5:57 PM
11	Current accreditation requirements in Ireland and Europe for the accreditation of Psychotherapists requires them to be trained to postgraduate level .	11/22/2023 3:57 PM
12	"Clinical supervision" is different to "supervision" and clinical supervision (linked to training providers) is an essential component in protecting clients and therapists	10/25/2023 4:48 PM
13	To protect the public and support the professional development of the student.	10/22/2023 12:48 PM
14	To implement these criteria as they are drafted would result in a very unsafe environment for clients, students, and qualified psychotherapists.	10/21/2023 6:44 PM
15	Supervision should be a requirement for all trainees	10/18/2023 10:36 PM
16	As psychotherapy is relational work it is imperative that therapists have reflected on their own experiences prior to working with clients	10/18/2023 5:05 PM
17	This is a critical part of providing safe and effective psychotherapy to clients.	10/18/2023 12:29 PM
18	It is very important that students understand themselves in the group	9/13/2023 5:06 PM

Q67 Please fill in the boxes below if you consider there to be an omission

Answered: 12 Skipped: 416

ANSWER CHOICES	RESPONSES	
Suggested Omission	100.00%	12
Proposed wording to rectify omission	58.33%	7
Rationale for Comment	83.33%	10

#	SUGGESTED OMISSION	DATE
1	Systemic Psychotherapy. Training has been working collaboratively with practice placement sites to provide a collaborative way of ensuring high standards of training and supervision this has worked well between the training institutes and placement sites	12/1/2023 4:36 PM
2	Lack of recognition of the current high standards for Psychotherapy training	12/1/2023 9:15 AM
3	Personal therapy for a trainee therapist is a sine qua non.	12/1/2023 2:00 AM
4	Supervision -modality specific and appropriate ratio to client work within the context of the training .	11/30/2023 6:10 PM
5	Engagement in personal psychotherapeutic experience within the training programme, both in the regulations and in the formulation of the proficiencies.	11/30/2023 12:39 PM
6	As listed in all of 66 above	11/26/2023 10:52 AM
7	Personal Psychotherapy Experience	10/25/2023 4:48 PM
8	Duration of Training	10/22/2023 12:48 PM
9	Duration of Training: Currently European requirements are for a 4 year psychotherapy specific training (which follows on from an undergraduate degree spanning at least 3 years).	10/21/2023 6:44 PM
10	Distinctions need to be made around different levels of qualifications	10/18/2023 5:05 PM
11	Length of training	10/18/2023 12:29 PM
12	Evidence based	9/13/2023 5:06 PM

#	PROPOSED WORDING TO RECTIFY OMISSION	DATE
1	Supervision must be modality specific and supervisors must be trained within the orientation and framework of each modality. Supervision and its core assessment function of clinical practice should remain within the Training context , in co-operation with placements and with appropriate Professional Supervision according to modality .	11/30/2023 6:10 PM
2	We would like to have a requirement for personal psychotherapeutic experience mandated as part of the criteria for training, and/or have proficiencies included (both in Professional Development and in Professional Knowledge and Skills sections) that are directly linked to the contribution such engagement ensures for the student.	11/30/2023 12:39 PM
3	A requirement for engagement in personal psychotherapy during training needs to be mandatory	10/25/2023 4:48 PM
4	Add to criteria for Education and Training Programmes that courses must be of 4 years duration, and preceded by a relevant undergraduate degree.	10/22/2023 12:48 PM
5	This might be addressed either by a stipulation in regard to the duration of training as allowed for within Clause 25 of the Directive of the European Parliament and of the Council of 28th June 2018 on a proportionality test before adoption of new regulation of professions which states: "Where relevant in view of the nature and the content of the measure being analysed, Member States should also take the following elements into account: the connection between the scope of professional activities covered by a profession and the professional qualification required; the complexity of the tasks in particular as regards the level, the nature and the duration of the training or experience required; the existence of	10/21/2023 6:44 PM

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different routes to obtain the professional qualification; whether the activities reserved to certain professionals can be shared with other professionals; and the degree of autonomy in exercising a regulated profession in particular where the activities relating to a regulated profession are pursued under the control and responsibility of a duly qualified professional."

6	Level 9 training required. Applicants applying to level 9 should have an undergraduate course of 3 years completed.	10/18/2023 12:29 PM
7	Courses should include evidence based therapies as well as the instructions on how to critically evaluate scientific evidence	9/13/2023 5:06 PM
#	RATIONALE FOR COMMENT	DATE
1	To date clinical supervision and placement specific supervision has been collaborative between collages and placement sites this has worked well in systemic psychotherapy training to date	12/1/2023 4:36 PM
2	What has been proposed is a lower standard than the current standard for the profession. This will cause significant difficulty for psychotherapist in their movement in Europe and in the UK	12/1/2023 9:15 AM
3	Appropriate training is modality specific and relevant; Supervisors must be experienced Psychotherapists with significant practice and training experience .	11/30/2023 6:10 PM
4	The proposed proficiencies do not adequately present how personal learning from their own therapy process informs the practice of the psychotherapist and provides safety for the client. We view personal psychotherapeutic experience – in keeping with modality specifications – as integral to the training programme and confirmation of attendance would be required. Without such an integral/integrated requirement for this form of core support and formative experience, a programme would not have any real validity. For many of our modalities, personal psychotherapy experience or personal therapy/analysis lies at the very centre of the programme. Personal psychotherapeutic experience ensures that the trainee psychotherapist is alert to aspects of themselves, for example blind spots, defence mechanisms and attachment styles, when they are working with a client, in order for them to know how to provide a safe, professional, effective way of working with a client. It is this that provides the trainee with the firmest grounding for doing this work, and it is also in this that the trainee develops a sense of the nature of the work they will do. Our own experience of a long-term therapeutic relationship provides a strong basis for our ethical practice in this field. Without this experience, members of the public who become our clients will not be met by the same level of openness, understanding, etc., as what is furnished by this kind of experience.	11/30/2023 12:39 PM
5	Again, this is an essential component in ensuring we protect clients and ensure safe, ethical and best practice in the field of psychotherapy	10/25/2023 4:48 PM
6	To protect public and maintain standards. To adequately equip the student by allowing time to develop core skills prior to working with high need clients in placements, and to equip the psychotherapist for independent practice.	10/22/2023 12:48 PM
7	The rationale for this includes allowing for a progressive approach to clinical practice, allowing adequate time for personal development and skills development prior to placement, and allowing time to integrate learning. [REDACTED] do not believe that a period shorter than 4 years could adequately facilitate these important aspects.	10/21/2023 6:44 PM
8	Counsellor qualifications and work differ from that of a psychotherapist and such distinctions need to be made clear. Also someone with level 9 qualifications should be recognised as distinct from level 8	10/18/2023 5:05 PM
9	This would be in line with European requirements and the current standard of training within Ireland. The proposed level 8 training does not allow adequate time for personal and professional development required to practice as a psychotherapist.	10/18/2023 12:29 PM
10	It is important that students learn when things have no evidence and when they can trust a method. It is unsafe for students to be going out providing treatments such as energy healing which have no basis in evidence and can be dangerous.	9/13/2023 5:06 PM

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Q68 Please feel free to provide additional comments below

Answered: 58 Skipped: 370

ANSWER CHOICES	RESPONSES	
Issue	96.55%	56
General Comment	81.03%	47
Rationale for Comment	77.59%	45

#	ISSUE	DATE
1	Years of experience as a therapist working with clients should be taken into consideration	12/1/2023 5:07 PM
2	Supervision	12/1/2023 5:00 PM
3	In reading the proposal there seems to me to be confusion around the role of CORU.	12/1/2023 5:00 PM
4	Use of the term service user.	12/1/2023 3:59 PM
5	Disabled access	12/1/2023 2:51 PM
6	Level 8 on the (NFQ) for Entry to the Register is appropriate.	12/1/2023 1:29 PM
7	The proposed standards, in some areas, do not meet the European Association for Psychotherapy (EAP) standards and constitute a lowering of standards in this jurisdiction	12/1/2023 12:39 PM
8	Lack of attention to readiness to engage in Psychotherapy training	12/1/2023 9:21 AM
9	The criteria outlined here by CORU do not meet the European Association for Psychotherapy (EAP) standards.	12/1/2023 6:29 AM
10	Psychotherapy and counselling are very different and distinct professions and skillsets. It's easier for a consultant surgeon (psychotherapist) to do the work of a GP (counsellor) - the opposite is simply not possible.	12/1/2023 2:05 AM
11	Psychotherapy requirement	11/30/2023 8:28 PM
12	standards are lower than European and current Irish standards.	11/30/2023 8:13 PM
13	Entry level to psychotherapy training to remain at level 8 or equivalent . Minimum of 4 year's post graduate training .	11/30/2023 6:23 PM
14	Clinical placement hours.	11/30/2023 5:28 PM
15	[REDACTED]	11/30/2023 4:33 PM
16	Adherence to the Standards set by the European Council for Psychotherapy	11/30/2023 4:07 PM
17	Professional level on completion of training	11/30/2023 1:45 PM
18	Lack of Definition of Psychotherapy and of Recognition of this as a Distinct Professional Activity	11/30/2023 12:42 PM
19	Based on what is currently proposed there will be a reduction in standards from what is currently in force with my accrediting association. How can this be anything other than a backward step? I would expect Ireland to be at least on the same footing as our European counterparts. The safety of the client is paramount. By reducing the requirement for supervision and removing the need for personal work two major guarantees of standards are being diluted or scrapped.	11/29/2023 3:20 PM
20	Derogations	11/29/2023 10:33 AM
21	Standards need to meet standards laid down by European Association for Psychotherapy	11/28/2023 9:09 PM
22	EU standards must be interchangeable	11/28/2023 8:08 PM
23	Lowering of standards	11/28/2023 4:45 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

24	The person of the Therapist	11/26/2023 6:26 PM
25	I have major concerns with regard to the The absence of overarching Sound & Robust Clinical Governance of Psychotherapy as a profession as it is presently prescribed in these CORU regulation for both counselling & Psychotherapy	11/26/2023 11:10 AM
26	EAP standards	11/23/2023 8:03 PM
27	Standards for Psychotherapy training	11/23/2023 5:58 PM
28	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards. T	11/23/2023 5:41 PM
29	Page 9, section 2 of Standards and proficiency for counsellors incorrect	11/23/2023 1:12 AM
30	he Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards.	11/22/2023 8:08 PM
31	The reference to 'service users'	11/22/2023 6:52 PM
32	Bringing down the ongoing practice standards	11/22/2023 6:04 PM
33	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards.	11/22/2023 4:02 PM
34	General	11/22/2023 1:01 PM
35	Further clarification of the meaning of Practice Placement Hours On-site is required, in particular to take account of therapy provision through distance means	11/22/2023 10:55 AM
36	Ireland will no longer meet European Association of Psychotherapy (EAP) standards.	11/20/2023 4:33 PM
37	Educational Provider finding placements	11/20/2023 3:37 PM
38	In session clinical supervision	11/13/2023 6:13 PM
39	Personal Therapy in training	11/8/2023 5:18 PM
40	Personal Therapy	11/8/2023 12:33 PM
41	On registration the criteria for remaining on the register needs to be outlined.	10/26/2023 9:01 PM
42	Possibility of losing current high quality training	10/22/2023 2:00 PM
43	Danger of new titles emerging	10/21/2023 6:45 PM
44	Lowering the standard of psychotherapy in Ireland	10/18/2023 12:35 PM
45	Personal Therapy	10/11/2023 10:56 PM
46	Multicultural Responsiveness and EDI embedded in core standards of proficiency providing care to minoritized clients and communities	10/11/2023 7:59 PM
47	Please see broad feedback on proportionality of proposed changes	10/5/2023 5:20 PM
48	mandatory therapy for all counsellors and psychotherapists in training	10/3/2023 12:00 PM
49	Extra student hours.	9/22/2023 5:52 PM
50	Threshold standard should be higher	9/13/2023 8:41 PM
51	Lack of scientific evidence	9/13/2023 5:08 PM
52	Specialised psychotherapy training for work with children and adolescents	9/10/2023 12:47 PM
53	Generic psychotherapy terminology	9/7/2023 12:33 PM
54	Age	9/6/2023 6:38 PM
55	Differentiating between Counselling and Psychotherap	9/4/2023 10:03 PM
56	Addiction Counsellor	9/4/2023 8:11 PM
#	GENERAL COMMENT	DATE
1	Supervision is implicit in the draft documents for counselling and for psychotherapy registers. HOwever, there are no proficiencies or qualificaitons outlined for this practice which is an omission in my view.	12/1/2023 5:00 PM
2	Is it to create a new profession of psychotherapists to work in the services of the state or is	12/1/2023 5:00 PM

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(Psychotherapists)
to regulate the diverse range of therapists trained in the numerous modalities of therapy.

3	Please use client.	12/1/2023 3:59 PM
4	Remote hours should not be discriminated against, given the evidence that remote therapy is not inferior in outcomes.	12/1/2023 2:51 PM
5	To enter into training required a foundation within human sciences and a level of maturity and life experience. This is not reflected in the proposals.	12/1/2023 9:21 AM
6	250 hours of psychotherapy should be required during training	11/30/2023 8:28 PM
7	Why would we have lower standards than other European countries.	11/30/2023 8:13 PM
8	Existing standards to be maintained .	11/30/2023 6:23 PM
9	500 hours is excessive	11/30/2023 5:28 PM
10	Deviating from these Standards, agreed after long consultation with international experts, would impact the quality of training and reduce safety for both clients and therapists.	11/30/2023 4:07 PM
11	The scope of practice of a psychotherapist is much deeper than that of a counsellor though it includes this level. Professional training should be to Masters level –Level 9.	11/30/2023 1:45 PM
12	We are concerned that the current proposals do not adequately differentiate between the complexities of the work of a psychotherapist as compared with that of a counsellor, including matters relating to content and scope of practice. Despite the provision of two separate registers, the current proposals make very little differentiation between counselling and psychotherapy. This may be linked to contributions from those who do not see a difference between counselling and psychotherapy. We believe that it is important to have a clear definition of what psychotherapy involves as a practice in order that we can develop appropriate supports in training and beyond for this; and as a way also of having clarity for the public and for referrers, uncertain of the distinction between our fields, that we develop clear definitions of these two fields of practice, recognise them as separate professions, and move beyond the confusion that currently prevails. We think it is very important to recognise the distinctiveness of psychotherapy as a profession. This does not solely relate to a distinction between psychotherapy and counselling. It is also in relation to other forms of professional practice, including psychiatry and clinical/counselling psychology, where shorter term and focused interventions are central to that work.	11/30/2023 12:42 PM
13	Greater recognition of professionals who come to psychotherapy from a non-traditional, though akin disciplines, must be made.	11/29/2023 10:33 AM
14	CORU's criteria will not meet EAP standards	11/28/2023 9:09 PM
15	how can we consider anything less than our european colleagues	11/28/2023 8:08 PM
16	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards. This could be raised at Q.68 on the form. Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries. Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?	11/28/2023 4:45 PM
17	There is no consideration for the person of the therapist.	11/26/2023 6:26 PM
18	I have major concerns with regard to the The absence of overarching Sound & Robust Clinical Governance of Psychotherapy as a profession as it is presently prescribed in these CORU regulation for both counselling & Psychotherapy	11/26/2023 11:10 AM
19	It is important for the profession and for clients that standards do not fall below those existing or those in other countries with whom we are affiliated.	11/23/2023 8:03 PM
20	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards. This could be raised at Q.68 on the form. Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries. Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?	11/23/2023 5:58 PM
21	This seems to be a copy and paste from another profession which is not relevant to counsellors or psychotherapists	11/23/2023 1:12 AM
22	The language used is not in keeping with the practice of psychotherapy. I believe it objectifies clients and depersonalises them	11/22/2023 6:52 PM

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23	The qualification, experiential and supervision requirements are drastically brought down in many areas. While going generic we need to understand that diluting the requirements in key areas could adversely affect quality of our mental health services provided	11/22/2023 6:04 PM
24	Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries. Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?	11/22/2023 4:02 PM
25	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards. Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries.	11/22/2023 1:01 PM
26	The manner in which "on-site" is used in the Criteria and FAQs could be taken to mean "face-to-face", thereby excluding distance means of practicing the profession. In the therapeutic professions the provision of services by distance means is both a growing area of expertise and a means by which access and quality can be increased. It is important that CORU regulations foster this welcome development by specifically including distance means of communication in service user practice, as well as in supervision and management.	11/22/2023 10:55 AM
27	Coru to ensure criteria meets those set out by the European Association of Ps	11/20/2023 4:33 PM
28	Having worked as an OT, and retrained as a Psychotherapist [REDACTED]. I wanted to share how valuable it would be if the educational providers were tasked with finding placement. The difference in governance was quite concerning for me comparing the two worlds. Educational providers have the capacity to do so much more for their students. I support stricter guidelines for the schooling and placement aspects.	11/20/2023 3:37 PM
29	At present supervision takes place in both group and 1:1 in person sessions.	11/13/2023 6:13 PM
30	Personal Therapy needs to be undertaken by trainee, at least 25 hours per year.	11/8/2023 5:18 PM
31	It is ABSOLUTELY IMPERATIVE that Personal Therapy be connected with the assessment of the student and MUST contribute to an assessment of whether a student has achieved the standards of proficiency.	11/8/2023 12:33 PM
32	Thirty hours per year minimum is suggested as necessary for the ongoing development of the counsellor and psychotherapist.	10/26/2023 9:01 PM
33	Thank you to all involved in this process, I understand that it is a long and difficult process. I look forward to seeing how this consultation process evolves.	10/25/2023 4:50 PM
34	It is already being indicated that some level 9 training providers will exit the market whould level 8 be adopted. This will have a very negative impact on the high quality psychotherapy currently available as new graduated from Level 8 course would not be as highly skilled as Level 9 graduates.	10/22/2023 2:00 PM
35	Ethical concerns linked to the gaps in relation to personal therapy, supervision, and duration of training, which we have heard raised by some current level 9 providers, poses a risk that some current level 9 providers will exit the field, or will find new titles for their courses to adequately reflect the standard currently provided, and actually required, but under new unregulated professional titles such as e.g. 'Trauma Therapist' or 'Mental Health Therapist'. While we at [REDACTED] are shocked by this, we do realise that some providers (not us) are considering moving in that direction. It would be a real shame if the regulation by CORU of Counsellors and Psychotherapists, actually reduced standards and public safety and led to a more confused field of practice.	10/21/2023 6:45 PM
36	The proposed drafts are lowering the standard of psychotherapy for clients in Ireland.	10/18/2023 12:35 PM
37	I strongly believe that personal therapy should be mandatory for trainee psychotherapists	10/11/2023 10:56 PM
38	On the Criteria for Education and Training Programmes, I would like to highlight the importance that CORU review both profession specific criteria urgently to ensure it encompasses meaningful EDI outcomes from training courses providing the counselors and psychotherapists of the future. It is my experience that this is not currently the case with respect to core training in Ireland and there is evidence both locally and internationally this is leading to non- inclusive, oppressive training & practice in some instances. I would point to the work of the Coalition for Inclusion and Anti-Oppressive Practice in the UK in recent years as well as the requirements for licensure in the USA as relevant international examples in this regard. We also point to the opportunity presented by regulation to provide practitioners with core training that aligns with the HSE's second Intercultural Health	10/11/2023 7:59 PM

1. Tolerance for psychotropic drugs (Psychopharmacists)

considering issues of language, culture, beliefs and health and/or social care needs

10/5/2023 5:20 PM

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objectives. It provides opportunity for all members in society to up-skill themselves through accessing higher education and enter these professions.

5	If these standards are adopted, Ireland will have lower standards of entry for psychotherapists and public safety than other European countries. Those trained here may encounter difficulties working in other European countries. The weakening of standards for psychotherapy in Ireland compared to European standards represents a risk to the safety of vulnerable members of the public.	12/1/2023 12:39 PM
6	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards. Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries. Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public.	12/1/2023 11:53 AM
7	Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries .	12/1/2023 6:29 AM
8	Receiving psychotherapy is considered an integral part of psychotherapy training throughout the Western world. In Europe the European Association for Psychotherapy EAP, and all its subsidiary associations in Ireland, maintain this requirement.	11/30/2023 8:28 PM
9	It will make the qualification less than other EU countries. Also removing the requirement for personal therapy in my opinion makes it less safe for clients. This is a demanding job particularly when working with complex clients.	11/30/2023 8:13 PM
10	Existing standards provide a high degree of safety and rigour of training .	11/30/2023 6:23 PM
11	Most Psychotherapy courses run on a part time basis in private colleges with high fees. Most psychotherapy students are in full time employment while studying part time. Have to add an additional 380 placement hours to an already packed schedule of work, study, assignments, supervision and personal therapy is too much. It would mean working in the placement for free for at least two years which would be impossible for most people.	11/30/2023 5:28 PM
12	The promotion of safe, efficacy-based practice and maintaining the quality standards of our European neighbours.	11/30/2023 4:07 PM
13	This level of training, in addition to the requirement for personal therapy, equips practitioners to work with deep seated mental/emotional disturbances of a psychiatric level.	11/30/2023 1:45 PM
14	The distinctiveness of the work of psychotherapy is conveyed in the kind of language we use, and it is important that this appears in our framing of proficiencies, criteria, etc., so that the actual identity of our work is not erased. While we recognise the importance of a shared language to describe the overall parameters for thinking about training and practice, we see it as vital that the key values of the field of psychotherapy are expressed here within the language of this profession.	11/30/2023 12:42 PM
15	Risk to the safety of vulnerable members of the community	11/28/2023 9:09 PM
16	Psychotherapists need to have some life experience, they need to be able to manage themselves, their own biases and have a strong sense of themselves prior to working as a psychotherapist	11/26/2023 6:26 PM
17	I have major concerns with regard to the absence of overarching Sound & Robust Clinical Governance of Psychotherapy as a profession as it is presently prescribed in these CORU regulation for both counselling & Psychotherapy. There is a need for a more in-depth level of personal work as a therapists moves from counselling practice to psychotherapy practice. CORU's regulations as presently presented represent a gaping dilution of present standards for both professions. It is incumbent on CORU to alter these regulations if minimum standards are to be prescribed that seek to take care of all members of the public. Of particular concern are the members of public who are under 18 & vulnerable adults. Counsellors, Psychotherapists & present Irish Legislation states that as a profession we have a statutory & mandatory obligations to keep members of the public safe at all times. These regulations do not seek to fulfill these mandatory obligations & are in stark contravention & a violation of existing Irish Legislation in this regard	11/26/2023 11:10 AM
18	Psychotherapists work with complexity and huge vulnerability - why lower standards?	11/23/2023 8:03 PM
19	This would be a dreadful indictment of Psychotherapeutic training if these omissions were not rectified.	11/23/2023 5:58 PM
20	Ireland will have lower standards of entry for psychotherapists and public safety than other	11/23/2023 5:41 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

(Psychotherapists)
European countries and those trained here may encounter difficulties working in other European countries. Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?

21	Counselling and Psychotherapy is client led, often we are working in isolation, not as part of a service or organisation, and as such do not identify people attending counselling and psychotherapy as service users, but as clients	11/23/2023 1:12 AM
22	Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries. Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?	11/22/2023 8:08 PM
23	I believe it objectifies clients and depersonalises them. As psychotherapists we work from a subjective standpoint so it is of significant importance that we refer to clients in this personal and more meaningful way	11/22/2023 6:52 PM
24	The standards set in the draft documents are too low while considering standards set by EAP or even IAHIP	11/22/2023 6:04 PM
25	need for Ireland to meet European Standards.	11/22/2023 4:02 PM
26	Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?	11/22/2023 1:01 PM
27	On-site hours should be clarified as meaning physically or virtually on a placement site. Clarification is required to ensure that online provision is explicitly include in relation to (i) online and hybrid placements where contact with clients and supervisory/managerial staff may be by distance means and (ii) remote working arrangements, where supervisors, managers and staff in a placement may carry out their responsibilities through distance means.	11/22/2023 10:55 AM
28	Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standards? Ireland will have a reputation for lower standards for psychotherapists and public safety than other European countries. Those trained here may encounter difficulties working in other European countries.	11/20/2023 4:33 PM
29	Supervision does not take place with the client present. Recordings and note taking can be used to appropriately prepare for supervision.	11/13/2023 6:13 PM
30	The area of Counselling & Psychotherapy is directly associated with and promotes to facilitate an individual to connect with their inner lived experience. Unconscious behaviors such as fusion with thoughts that maintain psychological inflexibility, by their very nature cannot be addressed or even noticed, by an individual (ie the Student) who has not attended Personal Therapy. Attending, in personal therapy, to ones' own lived experience/trauma history/biases/areas of judgment of self and others is where lasting change takes place. Having the courage to face ones fears and one history and to experience a willingness to feel pain in the service of what is important to you, while in the presence of another, is not something that can be taught from a book. There is no book or lecture that can replicate the lived experience of sitting the clients chair. It is extremely challenging for many, to face their own agency and to embrace it, on a deeply psychological and emotional level. As Yalom (2001) said, "as long as we deny our own agency, real change is unlikely because our attention is directed toward changing our environment rather than ourselves." By the same token, a psychotherapist who has not committed to their own personal growth, cannot inhabit the clients world with the same compassion and understanding, as those who have invested in their own personal growth. The whole point of counseling and psychotherapy is to "make the difference beyond technique", Rober (2016). Technique is what is taught, the "difference" is learned through lived experience. Being a client, takes immense courage. Sitting with your own vulnerability, take immense courage. Taking the risk of staying in the therapeutic relationship and being willing to experience Unconditional Positive Regards and Non-judgment, takes immense courage. Daring to show your true self in the therapeutic relationship, takes immense courage. Standing on the platform, harnessing up, experiencing the surge of terror, pushing through that fear, while going against what your body is possibly screaming at you and then jumping, will never compare to reading endless accounts of doing that bungee jump. In my opinion, the counselor or psychotherapist, who does not commit, on an ongoing basis, to their own personal growth, is a counselor or psychotherapist who is lacking and one that could potentially do more damage through unconscious bias than good. The Hippocratic Oath states "first, do not harm".	11/8/2023 12:33 PM
31	The CPD required to remain on the register must be made obvious for counsellors and	10/26/2023 9:01 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes
(Psychotherapists)
psychotherapists and must be substantial.

32	We need to avoid dropping the quality of service available to the public.	10/22/2023 2:00 PM
33	We have heard this discussed and are concerned by the possibilities being proposed and that these may be unintended consequences of achieving the regulation that we have fought so long for.	10/21/2023 6:45 PM
34	The level 8 requirement can not meet the same standard of psychotherapeutic practice as level 9 training.	10/18/2023 12:35 PM
35	Without personal therapy the trainee will not have insight into their own psyche, or experience of the process of change in Psychotherapy. These are fundamental elements and I know the rationale is that they are not an assessable criteria on the training but that does not mean that there is no learning in it. Even without assessing it, personal therapy, if undertaken and signed off to a level of at least 100 hours cannot fail to provide vital self-information and relevant knowledge for the trainee.	10/11/2023 10:56 PM
36	As per my earlier submission I feel the above is crucial to get right now as it has not been possible so far and there is feedback from service users, allied professionals, students and practitioners that this is a crucial area	10/11/2023 7:59 PM
37	standards should not be down regulated by the state	10/3/2023 12:00 PM
38	Many students have huge expense to qualify as it is already. To put pressure to complete was is now pre-accred hours (where at present many get paid) to student hours and to complete before qualifying is both unfair and unrealistic. .	9/22/2023 5:52 PM
39	Putting public at risk and also not recognising the value of our profession	9/13/2023 8:41 PM
40	Overall there is no mention of science and science and evidenced based treatments are the only way at present we can be sure that we are not doing harm to clients.	9/13/2023 5:08 PM
41	As graduates and practitioners we are only qualified to work with under 18's and there is concern that it may be a requirement to have completed a portion of clinical placement hours with adults. We are a highly trained and specialised cohort of psychotherapy practitioners are want assurances we will not be excluded from the register for the above reasons.	9/10/2023 12:47 PM
42	People can still claim expertise in a specific approach with a broad course, with insufficient emphasis on protocols and approaches. This is already happening in Ireland	9/7/2023 12:33 PM
43	to avoid 21 yr olds etc. coming out of undergraduate degrees without the requisite life experience of neural development for the work	9/6/2023 6:38 PM
44	Consider the rationale for splitting the two professions. I am not aware of any courses that only offer one or the other both in ROI or the UK. I would worry that it will be a race to the bottom and organisations will deem it suitable/appropriate to only employ counsellors in their organisations, this will justify lower pay for these professionals and jeopardise the work. How can a distinction be made between the work that a counsellor does and what a psychotherapist does. Can anyone in the profession clearly state how they transition between the two and how they become a counsellor with one particular client and morph into a psychotherapist with a different client. The two are intertwined and I believe it is mainly down to semantics. The criteria for training in both seems very similar and so again, I don't understand why a differentiation is being made. Theoretically and historically, there is little to no clear distinction made between both. If you are working as a Counsellor and midway through your work your client brings something that falls into the realm of "psychotherapy" what do you do? Likewise, if you are working as a psychotherapist and someone brings something that is more suitable to "counselling", do you refer to a counsellor and tell them that you are not able or interested in working with that? Clients don't fit into neat categories and I feel this needs to have prior consideration, rather than waiting for a less experienced person dealing with a very difficult situation.	9/4/2023 10:03 PM
45	Protected Title	9/4/2023 8:11 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes (Psychotherapists)

Q69 Please feel free to provide additional comments below

Answered: 21 Skipped: 407

ANSWER CHOICES	RESPONSES	
Issue	100.00%	21
General Comment	85.71%	18
Rationale for Comment	76.19%	16

#	ISSUE	DATE
1	Stabdards do not reach EAP Standards	12/1/2023 3:59 PM
2	Requirement for Clinical Supervision	12/1/2023 12:39 PM
3	Threshold level for entry to Psychotherapy register	12/1/2023 9:21 AM
4	Maturity of development, character, skills and experience are essential to even begin training and undergoing all the personal upheaval and change required to train as a psychotherapist.	12/1/2023 2:05 AM
5	Clinical Supervision	11/30/2023 8:28 PM
6	Interview process to establish motivation for training and minimum level of maturity and life experience prior to training .	11/30/2023 6:23 PM
7	Personal therapy threshold	11/30/2023 5:28 PM
8	nature of psychotherapy and threshold qualification level	11/30/2023 4:33 PM
9	Scope of Practice	11/30/2023 1:45 PM
10	The Lack of Attention to Readiness to Engage in Psychotherapy Training	11/30/2023 12:42 PM
11	Appropriate Supervision	11/26/2023 6:26 PM
12	The over all dilution of existing standards	11/26/2023 11:10 AM
13	Page 9 section 2 Standards of Proficiency - both Counsellor and Psychotherapists	11/23/2023 1:12 AM
14	The Criteria laid down by CORU do not meet the European Association for Psychotherapy (EAP) standards.	11/22/2023 6:52 PM
15	Need to specifically include team/ group hours in Direct Observation.	11/22/2023 10:55 AM
16	External Clinical Supervision	11/8/2023 5:18 PM
17	Need for clarification on the personal therapy required by counsellors and psychotherapists.	10/26/2023 9:01 PM
18	Danger of high quality courses closing	10/21/2023 6:45 PM
19	assessments need to be clarified. Counselors and psychotherapists work with the psychological subconscious material and are not assessors for clinically relevant diagnosis	10/3/2023 12:00 PM
20	Personal therapy	9/13/2023 5:08 PM
21	Competencies	9/7/2023 12:33 PM
#	GENERAL COMMENT	DATE
1	Proof in relation to what is missing in relation to EAP Standards.	12/1/2023 3:59 PM
2	The minium level of enter must be Level 9 this will ensure public safety and the dept of training and experience necessary to engage in Psychotherapy wiht vunerable people.	12/1/2023 9:21 AM
3	150 hours of clinical supervision should be required during training	11/30/2023 8:28 PM
4	Already a feature of most training programmes and needs to be maintained .	11/30/2023 6:23 PM
5	No personal therapy required by CORU	11/30/2023 5:28 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

6	Some of the domain 5 proficiencies are alarming and indicate that the Registration Board's threshold for psychotherapy practice is very basic. Examples are where reference is made to empathy and active listening. These proficiencies are in fact proficiencies for ENTRY into training rather than for qualification. Many of the proficiencies are set at a level that would be unsafe for psychotherapy practice, though they might be suitable for counselling as a more problem-focused, procedurally-based professional discipline..	11/30/2023 4:33 PM
7	As in the comments in previous paragraph,, these levels of training and the associated scope of practice should be made public.	11/30/2023 1:45 PM
8	We are concerned that no attention is paid in the proposals concerning the assessment of readiness to engage in psychotherapy training. It seems important that this is examined explicitly, and the particular kinds of requirements that might ordinarily be in place to guide programmes in making decisions about entry stated clearly. We identify a risk here of the development of programmes that, in the absence of such guidance, may not consider this; the result of which may be the entry of people who are not prepared for this, outside of academic achievements.	11/30/2023 12:42 PM
9	As outlined in 68 above	11/26/2023 11:10 AM
10	As Counsellors and Psychotherapist we do not diagnose or assess. It is factually incorrect and needs to be reviewed with someone who works in the area, not copied and pasted from another profession.	11/23/2023 1:12 AM
11	Ireland will have lower standards of entry for psychotherapists and public safety than other European countries and those trained here may encounter difficulties working in other European countries.	11/22/2023 6:52 PM
12	We consider that for each student their Hours of Direct Observation should include time spent in a team observation setting, and that this should be made explicit in the Criteria.	11/22/2023 10:55 AM
13	Trainees must undertake weekly External Clinical Supervision with a fully qualified Supervisor	11/8/2023 5:18 PM
14	Counsellors and psychotherapists must engage in some personal therapy as part of their ongoing role.	10/26/2023 9:01 PM
15	We have already heard of colleges who plan to stop offering level 9 courses and instead focus on level 8 courses where students could enter through the CAO process. We have also heard of courses planning to remove or reduce required engagement in personal therapy and clinical supervision if not required for CORU registration so as to attract more fee paying student who would be attracted by the lower cost of training. This would inevitably reduce standards – the possibility of a race to the bottom is not a fantasy.	10/21/2023 6:45 PM
16	the differentiation to other relevant professions is unclear	10/3/2023 12:00 PM
17	It is important that students undertake some hours of personal therapy and group therapy. 60 hours over the course seems like a reasonable amount	9/13/2023 5:08 PM
18	Efficacy isn't being measured, hours of training and supervision are included, but not how competence is being measured	9/7/2023 12:33 PM

#	RATIONALE FOR COMMENT	DATE
1	We need to be in line with our international psychotherapy colleagues and the EAP Standards go much more towards protection of the public and the vulnerable client. Why are we in Ireland lowering our standards and settling for a lower standard	12/1/2023 3:59 PM
2	Students need to supervised in variety of settings	12/1/2023 12:39 PM
3	Clinical Supervision is considered an integral part of psychotherapy training throughout the Western world. In Europe the European Association for Psychotherapy EAP, and all its subsidiary associations in Ireland, maintain this requirement.	11/30/2023 8:28 PM
4	To retain standards for entry to training .	11/30/2023 6:23 PM
5	By removing any threshold for personal therapy takes away a core learning from studying psychotherapy. It would remove a personal experience of what is necessary to form a therapeutic bond.	11/30/2023 5:28 PM
6	The public need to be helped through education about the differences between psychotherapy, counselling, psychology and psychiatry, to be able to make INFORMED CHOICES about their treatment.	11/30/2023 1:45 PM
7	Emerging neuroscientific data points to the extension of adolescence into the mid-20s, suggesting that emotional, interpersonal, and social functioning is still very much in a state	11/30/2023 12:42 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

(Psychotherapists)
of development at this time. This is in line with observations made across these professions of the readiness of people to enter into this kind of work. Late-adolescent and emerging adult experience provides an important basis for this kind of work, but it is not a good time in which to be involved in such training itself. The emotional, interpersonal and social development of this time typically involves a great working through of experience. At this time, the demands of training in psychotherapy – particularly the emotional demands of this – would be damaging for trainees and, by extension, place clients at risk. We recognise the phenomenon, too, of the 'wounded healer', and that many people who have experienced a high level of difficulty in their lives are drawn to this kind of work. While, in the long term, this can be of value for the psychotherapist in training, it is important that there is a clear gap between the period of 'wounding' and the engagement in psychotherapy training. The current proposals do not recognise this.

8	It is essential the each Psychotherapists engages in Supervision off a regular basis , it is essential for good practice, for public safety, for engaging in critical thinking about your own work and to help you stay doing the work.	11/26/2023 6:26 PM
9	I have major concerns with regard to the absence of overarching Sound & Robust Clinical Governance of Psychotherapy as a profession as it is presently prescribed in these CORU regulation for both counselling & Psychotherapy. There is a need for a more in-depth level of personal work as a therapists moves from counselling practice to psychotherapy practice. CORU's regulations as presently presented represent a gaping dilution of present standards for both professions. It is incumbent on CORU to alter these regulations if minimum standards are to be prescribed that seek to take care of all members of the public. Of particular concern are the members of public who are under 18 & vulnerable adults. Counsellors, Psychotherapists & present Irish Legislation states that as a profession we have a statutory & mandatory obligations to keep members of the public safe at all times. These regulations do not seek to fulfill these mandatory obligations & are in stark contravention & a violation of existing Irish Legislation in this regard	11/26/2023 11:10 AM
10	We are not qualified to diagnose. As a rule we do not carry out assessments.	11/23/2023 1:12 AM
11	Why would we allow the standards for psychotherapy in Ireland to be weakened, made lower than the European standard, and thereby risk the safety of vulnerable members of the public?	11/22/2023 6:52 PM
12	Direct observation by many of the methods mentioned in the FAQs occur in a team or group setting. For example, a team rather than just a supervisor observing behind a two way mirror is standard in family therapy; and case presentations / review of recordings frequently include both peers, who are participating in the presentation, and trainers/ supervisors, who are assessing the presentation. In such situations it is not only the presenting student that is being assessed in terms of achievement of professional competencies, it is also the peers who participate in the exercise. Therefore the teamwork involved in the presentation should be counted as hours for all students present. Otherwise, valuable assessments of competencies of students other than those presenting may not be possible.	11/22/2023 10:55 AM
13	Personal therapy and personal development work is essential for the counsellor and psychotherapist in keeping the public safe. This work will assist the counsellor and psychotherapists to be better available and be a more effective therapist when working with clients.	10/26/2023 9:01 PM
14	The idea of students entering psychotherapy courses straight from school is seriously concerning, as is the possibility of training becoming so linked to commercial concerns.	10/21/2023 6:45 PM
15	assessments are area of expertise of psychologists and psychiatrists by definition.	10/3/2023 12:00 PM
16	It is not enough to simply do a set numbers of hours, students need thorough assessment against discipline standards to ensure that they are safe practitioners, hours alone does not ensure this	9/7/2023 12:33 PM

Q70 Please feel free to provide additional comments below

Answered: 13 Skipped: 415

ANSWER CHOICES		RESPONSES	
Issue		100.00%	13
General Comment		84.62%	11
Rationale for Comment		76.92%	10

#	ISSUE	DATE
1	Undermining and dumbing-down the profession of psychotherapy will leave us well below the international best standards. Why are we going backwards and offering the Irish public such a low grade and risky form of 'healthcare'. The scandals are writing themselves in this process.	12/1/2023 2:05 AM
2	Clarification of scope of practice and differences between counselling and psychotherapy to be highlighted . .	11/30/2023 6:23 PM
3	Clinical Supervision Threshold	11/30/2023 5:28 PM
4	Downgrading of the Profession of Psychotherapy	11/30/2023 12:42 PM
5	Emotional and Psychological maturity	11/26/2023 6:26 PM
6	As outlined in 68 & 69 Above	11/26/2023 11:10 AM
7	Section 3	11/23/2023 1:12 AM
8	overall standards to be met to be accepted onto the register are lower than those currently required for ICP and EAP recognition	11/22/2023 4:02 PM
9	Change location of definitions of crucial terms from FAQs to Glossary.	11/22/2023 10:55 AM
10	There is a lack of understanding as to the existing role of supervisor and that of which CORU are proposing.	10/26/2023 9:01 PM
11	Thank you	10/21/2023 6:45 PM
12	international standard of 'evidence based therapy' is not set anywhere in the world, as many ways to work therapeutically are simply not yet assessed in this way academically	10/3/2023 12:00 PM
13	Grandparent clause	9/5/2023 1:01 PM

#	GENERAL COMMENT	DATE
1	To avoid confusion and make it easier for public to understand and assess different services on offer.	11/30/2023 6:23 PM
2	No clinical supervision required by CORU	11/30/2023 5:28 PM
3	We are concerned that an enormous change in the nature of psychotherapy training and practice — what we see as a dramatic downgrading of this activity — is being pushed through very rapidly, and without sufficient discussion with key stakeholders. The proposed proficiencies have not been developed in relation to current norms in this field, including those that have evolved over decades of work by professional bodies.	11/30/2023 12:42 PM
4	The need for personal therapy or personal therapy exercises	11/26/2023 6:26 PM
5	As outlined in 68 & 69 Above	11/26/2023 11:10 AM
6	Therapy is client led. We do not set the agenda or the goals. We do not determine the lists. The client does. This is how therapy proves more successful - the person leads the way for their own process, with the therapist providing some guidance, feedback, observations where relevant.	11/23/2023 1:12 AM
7	As an experienced psychotherapist, I have critical concerns about the standards and criteria proposed by CORU for Psychotherapists because I believe they pose a risk to public safety and undermine the profession of psychotherapy. The Irish Association of Humanistic and	11/22/2023 4:02 PM

Counsellors and Psychotherapists Registration Board Stakeholder Consultation: Standards of Proficiency for Psychotherapists and Criteria for Education and Training Programmes

Integrative Psychotherapy (IAHIP), of which I am a member, is the largest Member Organisation of the Irish Council for Psychotherapy (ICP), and the largest accrediting body of psychotherapists in Ireland. We are accredited to the European gold standard approved by the European Association of Psychotherapy (EAP). This is the most exacting standard in Europe, and guarantees the integrity of our profession in Ireland. The EAP standard requires that Psychotherapists must meet the following criteria: · Seven years of training, ending in a postgraduate qualification (level 9 in Ireland). · Have personally undergone a minimum of 250 hours of Psychotherapy. · An appropriately trained and qualified supervisor must have supervised their training. In contrast, under the new CORU proposals, Psychotherapists would be required to only have a three- or four-year primary degree. Personal participation in therapy would not be a required part of their training, nor would their training need to be supervised by a supervisor who is appropriately trained and qualified. I believe strongly that CORU's/these proposed standards will undoubtedly weaken the efficacy of psychotherapy as a practice; diminish and negatively impact the rigour of training; while ultimately undermining public trust and safety in psychotherapy and psychotherapists as professionals, all of which go against the purpose of statutory regulation.

8	We propose that the most useful way to define key terms is to include within the glossary of terms of either the Criteria or Standards document. This should in particular include definitions and descriptions of on-site and observed practice.	11/22/2023 10:55 AM
9	We need guidance on what training is required for the counselling and psychotherapist supervisor.	10/26/2023 9:01 PM
10	█ appreciate the tremendous work that has gone into drafting the criteria and we thank you for all your work. We look forward to seeing how the drafts evolve following consideration of all the feedback that CORU receive through the consultation process.	10/21/2023 6:45 PM
11	international standard of 'evidence based therapy' is not set anywhere in the world, as many ways to work therapeutically are simply not yet assessed in this way academically	10/3/2023 12:00 PM
#	RATIONALE FOR COMMENT	DATE
1	To determine and highlight differences in available services for public.	11/30/2023 6:23 PM
2	Having no requirement for personal supervision is unethical. No matter how experienced the therapist, they should be required to attend supervision.	11/30/2023 5:28 PM
3	We are strongly concerned about the downgrading of the profession of psychotherapy within these proposals. We understand that some of the motivation for CORU's recommendation to set the threshold level at undergraduate level is to support access to the professions. An alternative route to the development of psychotherapy training in an equitable manner, allowing for diversity and an equality of opportunity of entry in the field, would be through the funding of training programmes. This could be developed on the model already in existence for psychologists in Ireland — in clinical, counselling, and educational modalities.	11/30/2023 12:42 PM
4	A degree of emotional and psychological maturity is an essential component of the Psychotherapist .Currently in Training Schools at master level there is provision for the need for Psychotherapy, this is important as it aids self awareness	11/26/2023 6:26 PM
5	As outlined in 68 & 69 Above	11/26/2023 11:10 AM
6	Counselling and Psychotherapy is client led. We do not set the agenda or the goals. We do not determine the lists. The client does. This is how therapy proves more successful - the person leads the way for their own process, with the therapist providing some guidance, feedback, observations where relevant.	11/23/2023 1:12 AM
7	as above	11/22/2023 4:02 PM
8	We note that currently crucial terms such as on-site and observed practice are defined in the FAQs. As the FAQs are evolving, and have no date or version control, these can change without any notice or notification. However, the meaning of on-site and observed practice are central to programme design and development, and therefore should be explicitly stated in the documents.	11/22/2023 10:55 AM
9	Is the use of the term supervisor in the context of CORU's definition misconstruing the understanding of clinical supervision. Should we use different terminology for the placement supervisor, i.e. mentor.	10/26/2023 9:01 PM
10	international standard of 'evidence based therapy' is not set anywhere in the world, as many ways to work therapeutically are simply not yet assessed in this way academically	10/3/2023 12:00 PM