



COSCA (Counselling & Psychotherapy in Scotland)

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# COSCA Counsellor and Psychotherapist Accreditation

# DIPLOMA ROUTE APPLICATION AND GUIDELINES

This is the Application and guidelines for COSCA Counsellor/Psychotherapist Accreditation through the DIPLOMA ROUTE.

The Diploma Route is for counsellors/psychotherapists who have completed a COSCA or equivalent diploma in counselling/psychotherapy and have at least two years post diploma counselling/psychotherapy experience. Please contact the Development Officer (Individuals/Courses) to obtain details on equivalency.

### AIMS AND PRINCIPLES OF ACCREDITATION

### What is Accreditation?

- COSCA, the professional body for counselling and psychotherapy in Scotland, aims to maintain standards of qualifications, training and practice in counselling and psychotherapy. This is to protect clients and counsellors/psychotherapists, minimise the danger of malpractice and support the development of counselling and psychotherapy in Scotland. COSCA, therefore, has developed a system of accreditation of counsellors and psychotherapists, underpinned by its Statement of Ethics and Code of Practice.
- 2. The key purpose of Accreditation is to provide an assurance to the general public that a counsellor/psychotherapist has been assessed and deemed to have attained a mature, professional, competent, safe and ethical standard of practice. Accreditation is also about confirming and evidencing good practice. Accreditation is seen as a part of the professional development of counsellors/psychotherapists. Accreditation requires applicants to demonstrate the quality of their practice and that they have reached a standard that is acceptable for accreditation by COSCA.

- 3. COSCA recognises that any system of accreditation is as much a protection for the counsellors/psychotherapists concerned as a protection for their clients. COSCA delegates responsibility for the format and criteria of the COSCA accreditation process to its Accreditation and Standing Policy Group. Through detailed discussions, and consultation within COSCA and other professional counselling bodies, the Group has designed these accreditation criteria, and will continue to monitor and review them. The Group strives to work reflectively so that a sensitive balance between safety and creativity can be reached. Underpinning the whole development of an accreditation system is the recognition that accreditation for counsellors and psychotherapists is a crucial yet complex process. As such it will require continual refinement and revision.
- 4. COSCA aims to make the process of accreditation accessible and supportive. It is aware of the diverse backgrounds of qualifications, training and experience that counsellors and psychotherapists will bring to the process of accreditation and it has aimed to design a system that can assess this fairly. The process of accreditation is about enabling applicants to show that they have achieved set criteria and is not simply a question of verifying that an applicant has submitted appropriate documentation.

### How do I prepare for submitting my application?

In advance of starting work on their application, COSCA strongly advises all applicants to:

- ✓ Join the COSCA Counsellor Accreditation Registration Scheme, which offers enhanced contact and support towards the process. Registration forms and information on the process can be found on the COSCA website <a href="https://www.cosca.org.uk">www.cosca.org.uk</a> under the headings: Accreditation/Counsellor
- ✓ Attend the COSCA Counsellor Accreditation System Workshop held biannually and advertised under Events – COSCA on www.cosca.org.uk

### How do I become a Practitioner Member of COSCA?

- The first step in the process of accreditation is that an applicant must be a Practitioner Member of COSCA. Practitioner Members are required to have completed a minimum of 300 cumulative contact hours of training in counselling/psychotherapy.
- The cohesive core of the above training needs to take place within a period of 5 years. As part of the above training, but not included in the 300 hours, you are required to have a supervised counselling practice placement. Additional training needs to be in substantial and planned blocks, and clearly progressional from the core training.

- Practitioner Members are required to have a cumulative practice base of 200 hours, with an average of 2 hours per week; have a supervision ratio of 1:12; and have achieved 54 cumulative hours of continuing professional development with an average of 18 hours per annum over the last 3 years.
- Applicants must abide by COSCA's Statement of Ethics and Code of Practice and reflect knowledge of the Statement throughout their application. Please note that you are eligible to apply for Practitioner Membership two years post your core training in counselling and psychotherapy.
- Details of how to apply for Practitioner Membership are available on the COSCA website under the headings Join COSCA/ Individual Membership

### How do I submit my application?

- Applications should be made by completing the present Application Form. The guidance for each of the required criteria is included within the form.
- Please ensure you are using the most up to date version of the form which can be found on the COSCA website under the headings: Accreditation/Counsellor.
- Please note that the minimum font size used in your application is 12. Please
  also ensure that you include a word count at the end of every written section of
  the application where this is indicated as required.
- Please include any supporting items of evidence such as copies of certificates in a Word, PDF, folder or Zip file format. Please ensure to clearly label each item indicating which of the application criteria it corresponds with, both on the folder and indicating its location on the Submission Checklist, Appendix B for instance 'Criteria 3-Evidence of Core Training')
- An electronic copy of the complete application alongside your supporting evidence must be submitted by email to Jenny Bell, Development Officer (Individuals/Courses): jenny@cosca.org.uk
- There are two submission dates per year, the 31st of March and the 30th of September.
- The Development Officer can complete a technical check on request on applications and provide feedback if they are submitted at least four weeks in advance of the submission date. The Development Officer cannot comment on whether the standard has been met for accreditation to be awarded but can advise of any technical criteria that may have been missed.

# What happens to my submitted application?

- Decision-making on applications for accreditation is the responsibility of COSCA's Counsellor Accreditation Panel. The Accreditation Panel is a working group comprised of experienced accredited counsellors. The Accreditation Panel aims to provide the degree of consistency necessary to take account of the variety of approaches, qualifications, training and experience presented for submission by applicants.
- Applications for accreditation must be submitted disclosing the identity of the
  applicant. The Accreditation Panel is bound by COSCA's internal guidance on
  conflicts of interest for decision making groups. This guidance is offered to
  assist those involved in COSCA's decision making groups like the
  Accreditation Panel to decide whether a conflict of interest exists and, if so,
  what steps should be taken. The Accreditation Panel is also accountable
  under the COSCA Statement of Ethics and Code of Practice, thus ensuring
  that applications will be dealt with by it with the utmost confidentiality.
- In their deliberations, the Accreditation Panel is asked to compare the entire
  documentation against the criteria. An application should be such that the
  Accreditation Panel can say, on the basis of what has been submitted, that
  the applicant is fit, via their learning, skill and experience, to work as a
  counsellor/psychotherapist independently, as well as within organisations.
- On the basis of the application the Panel should also be able to be confident that members of the public seeking help from the accredited counsellor will receive an appropriate response.

### What are the outcomes of applying to the Accreditation Panel?

When determining each application, the Accreditation Panel has four options:

- Accreditation
- Provisional acceptance for Accreditation subject to minimal requirements or re-submission of certain documents. See website for re-submission fee.
- No Accreditation Meantime some section(s) will require resubmission. See website for current fee.
- ➤ No Accreditation substantial section(s) of the submission do not fulfil COSCA's requirements and considerable work is required, essentially representing a fresh application. See website for re-application fee.

The Chief Executive of COSCA will inform applicants in writing of the outcome, normally within 16 weeks of the submission deadline.

The Panel will give details of where an application fails to meet the criteria. The

extent of the re-submission is at the discretion of the Panel. Applicants will be invited to fulfil the additional requirements and resubmit only that specific area which has been indicated by the Panel.

Applicants can respond to the decision made by the panel by contacting the Development Office or Chief Executive.

Applicants can appeal against the decision of the Panel, through the COSCA Appeals Procedure, within three months from the date of notification of the decision made. There are two grounds for appeal:

- > a failure to follow the assessment procedures and/or guidelines;
- or the applicant has new evidence which might have influenced the decision had it been available when the Panel considered the application for accreditation.

As a Practitioner Member of COSCA, your details would have been entered on the COSCA Register of Counsellors and Psychotherapists. On award of Accreditation, your category of membership would be changed to that of COSCA Accredited Member.

### How do I renew my Counsellor Accreditation?

Your Counsellor Accreditation is renewed on an annual basis coinciding with your membership renewal.

Please refer to: www.cosca.org.uk - Accreditation – Counsellors - Annual Renewal of COSCA Accreditation.

### **COSCA Accreditation of Counsellors is based on nine elements:**

- a) Applicant's personal details
- **b)** Ethics
- c) Core training
- d) Theoretical knowledge
- e) Therapeutic alliance
- f) Practice
- g) Continuing Professional Development
- h) Reflective Practitioner
- i) Supervision

A Submission Checklist is included in Appendix B.

### Self-Awareness and Use of Self

Please note that your own process and 'use of self' should be evidenced in every section of the application as you are required to show that you are a mature, reflective practitioner throughout.

Your application will not be successful if you do not include sufficient evidence of your self-awareness and use of self.

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and Declaration

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APPENDIX H Supervision Sessions

APPENDIX I Supervisor's Report

You must complete Appendix A: Applicant's Personal Details, Disclosure and Declaration in full.

APPLICANT'S PERSONAL DETAILS, DISCLOSURE AND

**APPENDIX A:** 

DECLARATION
PART I: Personal Details
Name
Surname
Forename(s)
Address
Post Code
Telephone:
Email:
Practitioner Membership Reference Number:
Have you previously applied for COSCA Counsellor/Psychotherapist Accreditation?
YES   NO
If YES, please give date
Counsellor Accreditation Workshops  Please confirm if you have: □
riease commin i you have.
Attended the COSCA Counsellor Accreditation System Workshop

Therapeutic Approacl	h		
	LICANT'S PER	RSONAL DETAIL	S, DISCLOSURE AND
DECLARATION			
Part II: Disclosure			
Information given below v	will not necessar	ily exclude you fron	n accreditation.
Have you had me     withdrawn?	mbership of any	professional couns	selling/psychotherapy body
YES		NO	
If "YES", please g	give details.		
Do you have any     Offenders (Scotla		ons (unspent) unde proceedings pendi	
YES	<b>3</b> 🗆	NO	
If "YES", please g	ive details.		
3. Do you have any you, which was su			ry proceeding brought against
YES		NO	
If "YES", please gi	ve details.		
Have you ever be     Scheme/Disclosu		ed under the Prote	cting Vulnerable Groups
YES		NO	
5. Are you currently Scheme/Disclosu		under the Protectin	g Vulnerable Groups
YES		NO	

APPENDIX A: APPLICANT'S PERSONAL DETAILS, DISCLOSURE AND DECLARATION

Part III: Declaration

#### I declare that:

- I am applying for COSCA Counsellor/Psychotherapist Accreditation, and agree to abide by COSCA's Guidelines and Criteria for the Accreditation of Counsellors and Psychotherapists, to be bound by COSCA's Memorandum and Articles of Association, and to abide by COSCA's Statement of Ethics and Code of Practice.
- 2. The evidence I have submitted gives an accurate portrayal of my training, practice, supervision and personal development in counselling.
- 3. I will inform COSCA of all criminal, civil, complaint or disciplinary proceedings brought against me in the future, which are relevant to my involvement with counselling.
- 4. I will provide such information as COSCA may require from time to time to confirm my continuing eligibility for Counsellor/Psychotherapist Accreditation.
- 5. I have appropriate and adequate public and professional liability insurance cover for all my counselling/psychotherapy work.
- 6. To the best of my knowledge and belief the information provided in this application is correct, and I understand that a failure to disclose on application or during the period of Accreditation, can lead to termination of my Counsellor/Psychotherapy Accreditation and COSCA Membership.
- 7. I will comply with COSCA's arrangements for handling complaints and concerns. (A copy of the COSCA Complaints procedure can be found on the COSCA website <a href="https://www.cosca.org.uk">www.cosca.org.uk</a>)
- 8. I agree to my details being published in the COSCA Journal *Counselling in Scotland* on being awarded COSCA Counsellor/Psychotherapy Accreditation.

YES □ NO □
Print Name:
Signature: Please insert your electronic signature.
If this isn't possible, a please type your email address and we will match
it to the email address the form has been sent from to confirm your
identity.
Date:

APPENDIX B: SUBM	APPENDIX B: SUBMISSION CHECKLIST								
	Content	Relevant page/ Appendix(es) in the application	Supporting Evidence Item(s)- (please specify item name and location)	Included (tick)					
Ethics / Personal details	Applicants personal details, disclosure & declaration	Pages 7-9 Appendix A							
2. Submission Checklist	Submission Checklist	Page 10 Appendix B							
3. Core Training/Theoretical Knowledge	Evidence of Core Training	Page 11							
	Copies of Certificates	Page 11							
	Criteria 3.3: Therapeutic Approach Statement	Page 12							
4. Therapeutic Alliance	Criteria 4.2: Therapeutic Alliance Statement	Page 13							
5. Practice	Criteria 5.2: Practice Log: Summary of Total Annual Practice Hours	Page 15 Appendix C							
	Criteria 5.3 Career Break	Page 14							
	Criteria 5.4: Summary of Recent Work	Page 16-20 Appendix D							
	Criteria 5.5: Client Time Range	Page 21-22 Appendix E							
	Criteria 5.6: Assessment Skills and Referral System Statement	Page 24							
	Criteria 5.7: Work Setting and Arrangements Statement	Page 25							
	Criteria 5.8: Evidence of Insurance	Page 24							
	Criteria 5.9/5.10: Case Study's Criteria 5.11: Transcript	Pages 30-31 Page 33 Appendix F							
6. CPD	Criteria 6.2: CPD Log Criteria 6.3: CPD Statement Criteria 6.4 CPD Evidence	Page 35 Appendix G Page 36							
7. Reflective Practitioner	Criteria 7.2: Reflective Practitioner Statement	Page 38							
8. Supervision	Criteria 8.1- Supervision History/ Current Supervision	Page 40-41 Appendix H							
	8.2 Supervisor's Report	Page 43-51 Appendix I							

### 3 CORE TRAINING / THEREAUPETIC APPROACH

### 3.1 Criteria

You must have successfully completed a COSCA validated diploma or equivalent in counselling or psychotherapy

### 3.2 Evidence

✓ evidence of successful completion of COSCA or equivalent diploma in counselling or psychotherapy, giving the name, month, and year of qualification award, provider, and location of the course, with relevant evidence of certification.

✓ evidence of the verification of all original documents by your supervisor, who should then sign the supervisor's declaration (Appendix I Supervisor's Report).

(Please contact the COSCA Development Officer (Individuals/Courses) to obtain details on equivalency.)

- Please ensure to submit any relevant items of supporting certification in relation to the above criteria.
- Please ensure to clearly title the items, indicating where they correspond with the above criteria.
- Please ensure to complete 'Appendix B, Supporting Documents' accordingly.

### 3.3. Therapeutic Approach Statement

Submission of a personal statement of your therapeutic approach(es) of 1500 – 2000 words. Please stipulate your counselling/psychotherapy approach(es) at the beginning of your personal statement.

The statement must include the following:

✓ a description of the theoretical approach of your practice. This statement needs to show clear consistency with all the following areas in this application: the theoretical framework(s) that you use, your core skills, your counselling practice (client case study); your counselling/psychotherapy supervision, your personal and professional development.

✓ A reflection of why you have chosen to work in this particular way. For example, how you came to, or chose your approach(es), and how your work has developed within it (or how your approach has changed) and what this means to you.

3.3 Therapeutic Approach Statement: (Please insert your response here)						
(Please insert your response here)						
Word Count:						

Panels Comments		

4.1 Criteria
You must be able to establish, maintain and develop a therapeutic alliance with
clients.
4.2 Evidence
Provide an 800-1,000-word statement which includes what you understand by the
development of a therapeutic relationship. This statement should detail how you
establish, maintain, and end a therapeutic relationship, including the core skills you
need to display and demonstrate to facilitate such a relationship.
4.2 Therapeutic Alliance Statement:
(Please insert your response here)
Word Count

4. THEREAUPETIC ALLIANCE

Panels Comments		

### 5. PRACTICE

### 5.1 Criteria

Prior to submission, you must evidence:

- ➤ a minimum of 450 hours of continuous supervised counselling practice over a minimum of three years within a period of 5 years prior to submission. However, these hours should not be spread beyond a period of 5 years.
- ➤ two years of this continuous supervised counselling practice should be at postqualifying level (average 90 hours per year, and a minimum of 60 hours per year).

### 5. Evidence

### 5.2 Practice Log

A log and/or statement of continuous supervised counselling practice of a minimum of 450 hours over a minimum of 3 years within a period of 5 years prior to submission. Supervised counselling practice hours gained during the diploma course can count towards the 450 hours. Please complete Appendix C (page 14) for logging your annual practice hours. Please note you do not need to evidence beyond 450 hours.

### 5.3 Career Break

If you have taken more than 3 months' time out from practice because of life events, please contact the Development Officer (Individuals/Courses) prior to submitting your application for guidance/advice.

### 5.4 Summary of recent work

A summary of a recent period of your client work (see Appendix D Practice Log: Summary of Recent Period of Work) demonstrating your ability to work with a variety of contracts and range of clients. A practitioner who works with 12 or more clients per week will need to describe no more than a continuous 6-week period, while a practitioner with a smaller practice will need to summarise up to 3 continuous months' work.

Please give a clear weekly division of the work, indicating variety of clients, stage of counselling/therapy, pattern of working week, client attendance, etc. Please comment on any noteworthy activity that is different to the norm, however, any short breaks/holidays are not regarded as part of the continuous period of work.

# CRITERIA 5.2/APPENDIX C: PRACTICE LOG: SUMMARY OF ANNUAL PRACTICE HOURS

Year	Number of Practice Hours	Work Setting
Example: 2021	90 + 45	Agency + private

# **Examples of work settings:**

- ✓ NHS
- ✓ Private/independent
- ✓ Statutory agency i.e. prison, school
- ✓ Voluntary counselling service

# CRITERIA 5.4/ APPENDIX D: PRACTICE LOG: SUMMARY OF RECENT PERIOD OF WORK

This table illustrates how the information might be shown.

Week	Date	Client Deta	ails		Session Number	Session Length	Focus of Session	Private Agency Other
	<u> </u>	Ref No.	Gender				1	
		Rei No.		Age				
Week 1	1.2.22	1	F	40	1	50 mins	Distress at loss of husband	Agency 1*
		2	F	46	6	50 mins	Fear of being alone	Private
		3	М	37	5	50 mins	Wanting to leave partner	Agency 2*
	2.2.22	4	F	28	20	50 mins	Working towards ending	Agency 1*
		5	F&M	40 + 41	10	50 mins	Separating	Private
Week 2	8.2.22	1	F	40	2	50 mins	Anxiety at responsibilities	Agency 1*
		2	F	46	7	50 mins	Strategies of support	Private
		3	М	37	6	50 mins	Last session, ending issues	Agency 2*
	9.2.22	4	F	28	21	50 mins	Ending	Agency 1*
	Etc.	Etc.			Etc.	Etc.	Etc.	Etc.

<sup>\*</sup> Agency 1 = Bereavement Counselling Centre

<sup>\*</sup> Agency 2 = Relationship Counselling Centre

<sup>\*</sup> Private = Private Practice

Date				Session Number	Session Length	Focus of Session	Private Agency Other
Date	Ref No.	Gender	Age	Session	Length	Focus	P/A/O
					Number	Number Length	Number Length

Week	Date				Session Number	Session Length	Focus of Session	Private Agency Other
Week	Date	Ref No.	Gender	Age	Session	Length	Focus	P/A/O

Week	Date			Session Number	Session Length	Focus of Session	Private Agency Other	
Week	Date	Ref No.	Gender	Age	Session	Length	Focus	P/A/O

Week	Date			Session Number	Session Length	Focus of Session	Private Agency Other	
Week	Date	Ref No.	Gender	Age	Session	Length	Focus	P/A/O

# CRITERIA 5.5/ APPENDIX E: FREQUENCY OF CLIENT CONTACT page 1 of 2

Over the past year, how many clients have you seen?					
Weekly					
Twice or more weekly					
Fortnightly					
Infrequently					
During the past year, how many	clients have you seen for periods up to:				
During the past year, how many 2 months or less	clients have you seen for periods up to:				
	clients have you seen for periods up to:				
2 months or less	clients have you seen for periods up to:				
2 months or less 3 – 5 months	clients have you seen for periods up to:				
2 months or less 3 – 5 months 6 – 12 months	clients have you seen for periods up to:				

# CRITERIA 5.5/ APPENDIX E: FREQUENCY OF CLIENT CONTACT Page 2 of 2

How many clients in your counselling/psychotherapy career have you seen for more than 2 years?					

This form assists the Accreditation Panel by providing an overview of your work and by giving evidence by which consistency with skills, training and practice can be judged. It is not intended to discriminate against those who specialise in either short or long-term work.

### 5.6 Assessment skills and referral system- Criteria

A brief statement (500 – 1,000 words) to evidence and demonstrate/describe:

- √ how you identify clients you feel able to work with
- √ how you assess the needs and limitations of your clients; where using
  assessment scales and measures applicants should evidence that they have
  been appropriately trained and/or are experienced to administer these and that
  they are authorised to use these where a license is required
- √ how you assess the successful working of the relationship
- ✓ what personal circumstances would prompt you to refer a client on e.g., separation, mental health issues, bereavement, ill health, etc.
- ✓ what limitations if any, there are in your work setting/s
- ✓ your capacity for referring clients to other appropriate forms of help
- ✓ examples of when you have decided that someone is unsuitable to work with as a client and when you have referred on, or the process you would follow should you require to refer a client on
- ➤ Please ensure to submit any relevant items of supporting evidence in relation to the above criteria, such as your client assessment and/or review documentation.
- ➤ Please ensure to clearly title each item of supporting evidence clearly indicating where they correspond with the above criteria.
- Please ensure to complete Appendix B, 'Supporting Documents' accordingly.

### 5.7 Work setting and arrangements (no set word count) - Criteria

Details of the setting where your counselling/therapy work is undertaken to show your ability to implement ethical practice in a work setting. If you work in more than one agency or practice and or work remotely, please submit descriptions and examples of documents for each setting. Your statement should include descriptions of the following:

- ✓ arrangements for privacy, avoiding interruption, arrival and departure of clients, client safety, counsellor safety
- ✓ record keeping and maintenance of confidentiality (your supervisor will be asked to comment on this)
- ✓ appointment arrangements, sample letter(s) to clients and handouts given to clients
- ✓ arrangements for breaks taken between counselling sessions in the course of a working day
- ✓ the Ethics and Code of Practice to which you adhere.
- Please ensure to submit any relevant items of supporting evidence in relation to the above criteria, such as your client contract(s), and any relevant policies and procedures. Please note this list is not exhaustive.
- Please ensure to clearly title each item of supporting evidence clearly indicating where they correspond with the above criteria.
- Please ensure to complete Appendix B, 'Supporting Documents' accordingly.

### 5.8 Insurance

### Criteria

Please sign Part III of 'Appendix A' (page 9) Applicant's Personal Details, Disclosure, and Declaration stating that you have adequate and appropriate public and professional liability insurance for your counselling/therapy work. (N.B. COSCA advises that professional liability cover should not be less than £1,500,000.)

### **Evidence:**

- ➤ Please ensure to submit a copy of your insurance. Please ensure to clearly title the item(s) indicating where they correspond with the above criteria.
- > Please ensure to complete Appendix B, Supporting Documents accordingly.

5.6 Assessment Skills & Referral System Statement				
(Please insert your response here)				
Word Count:				

Panels Comments		

5.7 Work Setting(s) and Arrangement(s) Statement: (no set word count) (Please insert your response here)					
(Please insert your response here)					
Word Count:					

Panels Comments		

### **5.8 Case study (including Transcript)**

The Case Study is written for the purposes of COSCA Accreditation. It is therefore a reflective narrative that evidences the use of your way of working (therapeutic approach) and demonstrates your application of its main theories in response to your work with the chosen client. It should critique the therapeutic relationship, your interventions with the client and your use of supervision to inform your practice with the client.

## **Case Study Criteria**

- Please provide either one case study of approximately 3,500 words, or two case studies of not more than 2,000 words each. We require *alongside* and *in* addition to your case study a 10–15-minute transcript from a session with the related client (not to be included within the word count).
- The Case Study and associated transcript should be a recent piece of work, not more than a year old from commencement of writing, and should be written for the purpose of COSCA Accreditation.
- This must include more than a single counselling session enabling you to evidence your ability to establish, maintain and end a counselling relationship.
- COSCA will accept a case study where the work with the client is ongoing, provided that you clearly reflect on how you would work towards ending with your chosen client.
- Please see *Appendix F Transcript Pro Forma* for full guidance on transcript requirements; the transcript **must** use this pro forma and format. If you are submitting two case studies, only one transcript is required.
- Case Studies based on remote counselling are acceptable provided that you demonstrate competencies and ethical practice in response to the related format of counselling delivery.

### **Case Study Structure:**

- There is some flexibility afforded with regards to the structure that your Case Study takes
- You may use headings for each criterion if you wish, however caution must be given not to unduly isolate/ separate related criteria.
- For instance, it would be problematic to neglect to refer to the influence of supervision on your client work except within your reflection under this heading
- Please evidence any scaling, charts, psychometrics or worksheets used in relation to your work with the client within your supporting evidence. Please ensure to clearly title each item of supporting evidence clearly indicating where it corresponds with the Case Study criteria. Please ensure to complete 'Appendix B, 'Supporting Documents' accordingly'.
- Regardless of the structure chosen, it must be easy to navigate and the necessary criteria clearly evidenced

### **Case Study Criteria and Evidence**

The Case Study must reflect on the following areas:

### Focus of sessions:

- ✓ Include the focus of the therapeutic work throughout the course of your therapy together
- ✓ Demonstrate working within your competencies with the range of issues covered
- Work setting and arrangements: Description of the work setting
- Ethical Practice:
  - ✓ Evidence of ethical practice with the client throughout your work together.
  - ✓ You must refer to contracting with your client and adherence to the COSCA Statement of Ethics and Code of Practice.
  - ✓ You must reflect on the identification and management of any ethical or boundary issues (where appropriate)

### Assessment and Referral:

- ✓ You must evidence the method by which the client was referred to yourself and any onward referrals you may have made
- ✓ You must evidence assessment of the suitability of the client to work with you in your preferred way of working e.g. your core orientation
- ✓ Be cautious about using interventions out with your preferred way of working. If these are used, you must ensure to give a rationale which includes how this sits within or beyond your main modality
- ✓ You must evidence the method(s) used to assess your client's needs. Assessing risk may also be relevant here
- ✓ You must evidence ongoing assessment of the client's needs and of the efficacy of the therapeutic relationship and your work together
- ✓ Where using assessment scales and measures applicants should evidence that they have been appropriately trained to administer these and that they are authorised to use these where a license is required.
- Additional information for applicants whose stated therapeutic approach promotes the use of Case Formulation and/or an associated Treatment Plan:
  - ✓ A brief and clear working Case Formulation must be included and its use evidenced in your Case Study

- ✓ Please ensure to include a narrative of the formulation process, which may or may not be accompanied by a diagrammatic formulation within your supporting evidence. Please ensure to clearly title each item of supporting evidence clearly indicating where it corresponds with the Case Study criteria. Please ensure to complete 'Appendix B, 'Supporting Documents' accordingly'
- ✓ It may be that you have applied a specific framework or Treatment Plan (such as for Anxiety or Depression) relevant to your client's issues. If this is the case, then the rationale and adherence to this framework must be evidenced
- ✓ Please evidence any scaling, charts, psychometrics used in relation to the above within your supporting evidence. Please ensure to clearly title each item of supporting evidence clearly indicating where it corresponds with the Case Study criteria. Please ensure to complete 'Appendix B, 'Supporting Documents' accordingly'
- ✓ Where deviation from the stated formulation or framework is deemed appropriate, the use of supervision and collaboration with the client to inform any changes must be evidenced

## • Therapeutic Alliance:

- ✓ Demonstrate your ability to establish, maintain, monitor and end the therapeutic relationship
- ✓ Reflect on the skills used throughout the counselling process to support the above

### Reflective Practice:

- ✓ Throughout the Case Study, be sure to reflect on and analyse
  the process of the work, rather than emphasising the narrative
  in the Case Study
- ✓ You must demonstrate your use of self and awareness of your own process, ensuring to reflect on your own actions, thoughts, and emotions in response to the client and the therapeutic process, including (where relevant) any implications for your practice moving forward

### Therapeutic Approach:

✓ You must evidence the key competencies of your chosen therapeutic approach:

- ✓ Your practice must be congruent to the stated therapeutic approach, and to the content of your whole accreditation submission.
- ✓ You must evidence the application and integration of theoretical knowledge in response to your work with the client.

# • Supervision-

- ✓ Throughout the case study **you must** evidence your use of supervision in response to the client.
- ✓ You must ensure that you reflect on how insight gained within supervision effectively influenced your work with your client

5.9 Case Study 1 (Please insert your response here)					
(Please insert your response here)					
Word Count:					
Word County					

Panels Comments		

study is being submitted, then please move to next section: Case Study Transcript. 5.10 Case Study 2 (Please insert your response here)

If using two case studies, please use the following for case study 2. If only one case

**Word Count:** 

Panels Comments		

### CRITERIA 5.11/ APPENDIX F: TRANSCRIPT PROFORMA

### 5.11: Evidence

Please complete Appendix F providing:

✓ a continuous 10 – 15 minutes' transcript from a session with the client, or
clients if using relationship work, as written about within the case study. This
should capture what was going on for you as a counsellor during the
interchange, the types of responses you made to the client, why you made
them and the broader rationale behind your responses and/or interventions.

## 5.11: Transcript Guidance and Criteria

Completing the Pro-forma and definition of its terms:

- ✓ Time= Please state where in the session the excerpt is taken from. Recording timings may be used
- ✓ Dialogue=Please use the terms CO for Counsellor and CL for Client. To differentiate between counsellor/client dialogue please use bold italic for counsellor dialogue.
- ✓ Process= In this section clearly state what was going on for you as a counsellor during this interchange and what skill or intervention you demonstrated in relation to this
- ✓ Evaluation= Please evaluate effectiveness or the non-effectiveness of this response or intervention, in relation to the interchange with the client. For instance, what have you learned from this? What would you do differently?

Clearly the content and issues arising within the transcript will be unique and will not necessarily provide the opportunity to demonstrate all of your competencies as a counsellor. However, it should endeavour to demonstrate fundamental aspects of your therapeutic approach, and thus be consistent with your stated approach.

Please retain a copy of your recording until you are satisfied it will not be required as part of your evidence. The Panel has the right to request a copy to listen to, if it is considered to be helpful for your application. Once you have been awarded accreditation all evidence is confidentially destroyed.

	IA 5.11/ APPENDIX F CRIPT PROFORMA		
Time	Dialogue	Process	Evaluation

Time	Dialogue	Process	Evaluation

Panels Comments		

# 6. Continuing Professional Development

### 6.1 Criteria

You must have an accumulated total of 54 CPD hours with an average of 18 hours over the last 3 years.

CPD is an activity that develops your understanding and skills in your profession and impacts on your work as a counsellor. You should evidence a range of CPD activities, examples of which may include attendance at or completion of courses, workshops, conferences, webinars, (face to face or remotely) writing articles relevant to professional practice, participation in relevant groups or committees, personal therapy, research relevant to counselling therapy and self-directed learning and reading.

### **6.2-6.4** Evidence

- ✓ Criteria 6.2- Please complete 'Appendix G' the CPD log table (page 28), providing an overview of your CPD over the last 3 years. This must total at least 54 hours, with an average of 18 hours per annum.
- ✓ Criteria 6.3-Please provide a reflective statement of no more than 500 words detailing the ways in which at least 2 pieces of CPD (but no more than 3) have influenced your practice.
- ✓ Criteria 6.4 Please ensure to submit any items of supporting certification or other evidence confirming completion or attendance at CPD (where relevant) in relation to the above criteria. You must evidence a minimum of 54 hours. Please ensure to clearly title the items indicating where they correspond with the above criteria. Please ensure to complete Appendix B, Supporting Documents accordingly.

CRITEI LOG	RIA 6.2 / AP	PENDIX G- CONTIN	IUING PROFESS	IONAL DE	VELOPMEN
Year	Date	Type of CPD Activity and Provider(if appropriate	Learning from CPD activity including any influence on counselling practice	CPD hours	Annual hours
					_

Criteria 6.3 CPD Statement (Please insert your response here)	Criteria 6.3 CPD Statement
	(Please insert your response here)
W 10 1	
Word Count:	Word Count:

Panels Comments		

### 7. Reflective Practitioner

### 7.1 Criteria

You must be a reflective practitioner.

A reflective practitioner focuses on his/her own actions, emotions and thoughts in the counselling/therapy session as well as attending to the quality of the interactions between the client and him/herself.

Being a reflective practitioner involves a willingness to be vulnerable and to be open to learning. It also involves examining one's actions, emotions and thoughts in order to further develop active and critical inquiry about one's own aware and unaware activity in the session. Personal insight and self-awareness on the part of practitioners is considered central to being a reflective practitioner.

### 7.2 Evidence

Evidence of having undertaken a process of personal exploration and growth must be demonstrated.

This on-going personal development/growth needs to be consistent with your stated therapeutic approach and developing practice. For example, you may choose to reflect on how life experiences, personal therapy, insights gained through CPD or in supervision have impacted your personal development and practice.

Please give a statement 1200-1500 words a) reflecting on your process of personal exploration and development and b) how this has impacted on your work as a counsellor/psychotherapist and your use of self in the therapeutic relationship. Give specific examples of what happened when particular clients brought up a difficult issue for you, and how you dealt with it.

It is important that the above points are articulated in a way that is consistent with your stated therapeutic approach and developing practice.

7.2 Reflective Practitioner Statement (Please insert your response here)
Word Count

Panels Comments		

# 8. Supervision

### 8.1 Criteria

You must have 450 hours of supervised counselling/therapy practice on a ratio of 1:12.

### 8.1 Evidence

A detailed supervision log (see Appendix H Supervision Sessions) covering your 450 hours of counselling/therapy practice that you have undergone supervision at an average ratio of 1:12 during your practice (as stated in the COSCA Statement of Ethics and Code of Practice). At least 65-75% of your supervision must be on a one to one basis.

If group supervision is to be considered as part of the period of supervision, groups should be no larger than permits an allowance of 20 – 30 minutes per group member in the supervision session. The focus of the work must be on client related issues, and the group led by a substantially experienced practitioner: 'peer-led' groups are not acceptable.

Example: A counsellor/psychotherapist is a member of a supervision group of 4 supervisees, meeting for 2 hours every month. This provides  $\frac{1}{2}$  client supervision hour per month for the counsellor. The counsellor is also having fortnightly individual supervision sessions of 1 hour, providing her with a further 2 hours per month. She thus received 2 1 /2 supervision hours in total per month. She has arranged this amount of supervision because she works 8 hours per week, seeing between 6 – 8 clients per week. This works out at an average ratio of approximately 1:12 over the year.

### 8.1 Criteria

A statement of the name of your supervisor, duration, frequency of supervision meetings and ratio of supervision hours to client hours. For group supervision, please state the name of the supervisor, the size of the group as well as the duration and frequency of meetings (see Appendix H Supervision Sessions).

# CRITERIA 8.1/ APPENDIX H: SUPERVISION SESSIONS Page 1 of 2

# **Supervision History – Supervision Log**

Year	No. of Client Hours	Number of Supervision Hours		Ratio
		Individual	Group	

# **Current Supervision: (Individual Supervision)**

Current Supervisor
Name:
Duration
Frequency
Previous Supervisor
Name
Duration
Frequency

CRITERIA 8.1/ APPENDIX H: SUPERVISION SESSIONS Page 2 of 2
Group Supervision
Name of Supervisor
Size of Group
Duration
Frequency

If you have had additional group supervision, please copy this Appendix and complete as appropriate.

# Criteria 8.2: Evidence- Counselling/Psychotherapy supervisor's report

A report from your counselling/therapy supervisor (see Appendix I Supervisor's Report).

Your supervisor should be a substantially experienced or accredited counsellor/psychotherapist who belongs to an appropriate professional organisation that has a Statement of Ethics and Code of Practice. They should have wide experience in supervision and not hold any line management responsibilities for your counselling/therapy, unless there are exceptional circumstances.

Please note that if you have been working with your current supervisor for less than 6 months, you will also require a supervisor's report from your previous supervisor.

Your supervisor should have as much involvement as possible to support you in the compilation of your application. You may wish to pay for an additional supervision session to focus specifically on accreditation.

Please provide your supervisor with 'Appendix I' and the following documents to aid them:

- ✓ a copy of the COSCA Guidelines and Criteria for Accreditation of Counsellors and Psychotherapists
- ✓ a copy of the COSCA Statement of Ethics and Code of Practice
- ✓ a copy of your case study and transcript for them to verify (including a copy of the criteria for the case study)
- ✓ your completed application for feedback and confirmation.

CRITERIA 8.2/ APPENDIX I: SUPERVISOR'S REPORT Page 1 of 9

# It is your Supervisee's responsibility to provide you with:

- ✓ a copy of the COSCA's Application and Guidelines for the Accreditation of Counsellors and Psychotherapists
- ✓ a copy of the COSCA Statement of Ethics and Code of Practice

You are red	uired to	provide	information	on the	following:
	auii Gu to	PIOVIGE	milomiation		ionowing.

> that you have line managerial responsibility for the applicant

YES □ NO □

If YES, please describe below your line management relationship with your supervisee and how you think that it is in accord with paragraph 8 on Client-work Supervision in the COSCA Statement of Ethics and Code of Practice.

	•	ave a) received and b) ditation of Counsellors		OSCA's Application and Guidelines for ychotherapists
	YES		NO	
	If NO t	o either a) or b) above,	please	provide an explanation below.
<i>D</i>	that you b	ave a) received and b)	read th	e full Counsellor Accreditation
	-	n of your supervisee	icau iii	le full Courisellor Accreditation
	YES		NO	
	If NO t	o either a) or b) above,	please	provide an explanation below.

				submitted has been completed by dy(s) and the transcript of a counselling
	YES		NO	
	If NO	, please provide an expl	anatior	n below.
>	•	I of the criteria for couns		itation application of your supervisee creditation, including the criteria for
	YES		NO	
		, please state the specification and give your reas		ria not met in the accreditation for your view.

$\triangleright$	that you have a) checked and b) verified as accurate all original documents
	submitted with this application, including those relating to the core training and
	qualifications of the applicant

YES | NO |

If NO to either a) or b) above, please provide an explanation below

Name of Applicant:
Supervisor's Details
Supervisor's Details
Surname
Guinanie
Forename(s)
T oroname(e)
Address
Post Code:
Telephone No:
relephone No.
Email:
Qualifications / training in counselling/psychotherapy and counselling supervision
Please list your qualifications / training, giving names of awarding bodies and
dates qualifications/training gained.

SUPERVISOR'S REPORT

Page 5 of 9

**CRITERIA 8.2/ APPENDIX I:** 

Page 6 of 9

CRITERIA 8.2/ APPENDIX I: SUPERVISOR'S REPORT Page 7 of 9

Do you co Code of P	onsider that the app ractice?	olicant	abides by th	ne COSCA S	Statement of I	Ethics and
YES		NO				
If NO, p	lease explain					
How long h	nave you been supe	rvisina	the applica	nt's work?		
	iavo you boon oupo	. violiig	тіо арріїоц			
including re	e your opinion of the eference to the app the therapeutic relates	licant's	stated ther			

Do yo	u con	sider the applic	cant to be ready a	t this	time for accreditation by COSCA?
YE	S			NO	
If Y	∕es, p	lease give your	reason(s) below	<u>-</u>	
If N	No, pl	ease give detail	ls below.		

# To be signed by the Supervisor: ➤ The case study, transcript and the application were written by the applicant ➤ I have no line managerial responsibility for the applicant Print Name Electronic Signature If this isn't possible please send an email directly to COSCAs Development Officer Jenny, ienny@cosca.org.uk to verify all details on the supervisors report.

Date

Panels Comments		

	cosca.org.uk – Fees. be received before t	he Panel meeting date.
I am paying the Accr		
Direct to Bank:		
Virgin Money		
Sort Code: 82	68 05	
Account Numb	er: 70174110	
Date paid to Bank:		
Cheque enclosed		
Invoice required		Please add £2.00 service charge