![European Institute for Reality Therapy logo]

Evropski inštitut za Realitetno Terapijo
European Institute for Reality Therapy

EIRT BOOK of REGULATIONS for REALITY THERAPY PSYCHOTHERAPY TRAINING

1.   INTRODUCTION

1.1

Based on article 5 of the Statute of the European Institute for Reality Therapy (EIRT Statute) and the Book of Regulations for Reality Therapy Psychotherapy Training of the European Association for Reality Therapy, this document defines training standards, conditions and ways of obtaining the title of Reality Therapy Psychotherapist (RTP).

1.2

This Book of Regulations upholds the mission of the William Glasser International (WGI), the European Association for Reality Therapy (EART) and the European Institute for Reality Therapy (EIRT). It provides training standards, conditions and ways of obtaining the title of RT Psychotherapist (RTP) in accordance with the standards and criteria of WGI, EART and of the European Association for Psychotherapy (EAP).

1.3

The training for a Reality Therapy Psychotherapist lasts for a minimum of 5 years. It is divided into two phases: Phase One consists of 2 years and Phase Two of 3 years of training. The whole programme includes a minimum of 1564 hours of training. When the required education to degree level (or equivalent) is included, the training takes 3364 hours (minimum).

1.4.

Faculty in both phases of the training are trained in accordance with the educational standards of WGI and EART, who maintain a list of accredited faculty.

2. ENTRY PRECONDITIONS

The entry preconditions are listed as follows:

2.1 Completed 2nd phase of Bologna academic education in human or social sciences or equivalent

2.2. Initial constultation

2.3 Acceptance of training conditions and ethical standards

2.4 Clinical practice ensured

2.1 Completed 2nd phase of Bologna academic education in human or social sciences or equivalent.

If the degree is missing content areas necessary for a foundation in psychotherapy study, these will be identified and EIRT will help the candidate to find a way to cover the missing content during Phase Two of the training.

An undergraduate trainee can exceptionally become a candidate for RTP if s/he graduates before entering Phase Two of the training.

2.2. Initial consultation

Initial consultation is conducted in the group-setting partially at the end of the Basic Intensive Training and again at the first Workshop during the third-year of training - based on the written self-evaluation a candidate has sent to the Institute. In the written self-evaluation the candidate explains his/her motivation and personal potential to continue the psychotherapy training. Along with self-evaluations, the candidate provides a statement (in writing) about ensured clinical practice in an appropriate institution including regular supervision.

Initial session is provided by a Basic Training Instructor and during the third-year Workshop by two teachers involved in Phase Two of the training. The objective of the Initial consultation is together with the candidate (through cooperative self-evaluation) assess how his/her motivation and potential fit with psychotherapy training requirements. After Initial consultation, candidates continue their psychotherapy training based on the recommendation.

2.3. Acceptance of Training Conditions and Ethical Standards

The candidate signs the agreement (appendix 1: EIRT form 1) where s/he accepts both the conditions of the training programme and the ethical standards. Before the candidate signs the agreement s/he needs to read the relevant documentation on the EIRT website: The Book of Regulations for Reality Therapy Psychotherapy Training, the Code of Ethics and the Complaints and Appeals Procedures for educants. By signing the EIRT form, a candidate acknowledges that s/he has read and accepted the standards and procedures contained within the aforementioned documents.

When entering both Phase One and Phase Two of the training, the candidate signs an agreement with the EIRT where the rights and obligations as well as relationships are defined.

2.4. Clinical practice ensured

Before entering Phase Two the candidate is required to find clinical practice placement. During 3rd and 4th year of training the role of clinical practice is sensitizing for difficulties of people who need psychotherapeutic assistance. During

5th year, clinical practice means practicing psychotherapy under supervision. Institutions that offer clinical practice to candidates (mental health, social institutions or eqiovalemt, NGO's, or private practice), should have organised, regular supervision of the therapeutic work. In case the regular ongoing supervision is not being offered at clinical practice placement, the candidates are required to choose a supervisor among the accredited EIRT clinical practice supervisors.

Upon finishing the training, the candidate has to submit the statements from all the institutions where clinical practice was conducted during the training, evidencing number of hours along with supervisors' names and credentials.

3. CURRICULUM

3.1 COMPONENTS OF THE CURRICULUM

Training for RTP is balanced between theory, practice and personal experience. These three components of the programme are:

3.1.1 THEORETICAL STUDY

- Choice Theory, Reality Therapy and conventional psychopathology

- Reality Therapy and other approaches: different epistemologies, different understanding of life, personality and behaviour

- RT and theories of change

- Assessment and intervention in RT

- Multicultural dimensions of RT and understanding of social and cultural issues in relation to psychotherapy

- Multiple applications of Choice Theory

3.1.2 REALITY THERAPY PRACTICE

- Practical work during in-training practica sessions

- Clinical practice within mental or social health setting or equivalent, NGO's, or private practice

3.1.3 PERSONAL EXPERIENCE

- Conscious self-evaluation of personal beliefs and behaviour during the training;

- Becoming aware of own strategies of conduct, confronting, group educational process and in relationship with trainers

- Experience of and reflection on the relationships with learning group members and with the trainer;

- Personal development through a process of making and implementing plans for improving the quality of life, journaling, peer group experiences, portfolios, etc.

-      Personal psychotherapy

3.2 METHOD

The teaching is based on experiential learning. During the training candidates are continuously encouraged to consciously self-evaluate application of Choice Theory concepts in their own lives. The core principle is that a RTP candidate has to internalise these concepts before s/he can ethically or effectively utilise them in psychotherapeutic practice.

3.2.1 LEARNING THE THEORY

-      Lectures
-      Video content (lectures, RT demonstrations)
-      Candidates' presentations combined with group discussions
-      Film analysis
-      Essays on suggested psychotherapy literature
-      Discussions
-      Participation in conferences and professional meetings
-      Reviewing relevant literature
-      Manifesting Choice Theory beliefs through behaving

3.2.2   PSYCHOTHERAPEUTIC SKILLS TRAINING

-      Role playing
-      Authentic client method
-      Self-evaluation
-      Feedback from other training participants and trainers
-      RT demonstration and process analysis
-      Case studies
-      Individual supervision
-      Group supervision
-      Intervision (peer supervision)
-      Practicing RT in their own clinical practice

3.2.3 FOSTERING PERSONAL DEVELOPMENT

- Connecting with training participants on individual and group level
- Creating conditions for participants to connect in a group
- Sharing personal experiences
- Fostering understanding of candidate's own life through CT glasses
- Fostering integration and deepening of new beliefs
- Fostering quality of personal life improvement
- Providing feedback
- Encouraging writing (self-evaluation, journal, portfolio, literature reviews)
- Enabling cooperative self-evaluation with the trainer and group members
- Fostering client experience during role-play
- Supporting other roles in role-play (feedbacker, therapist)
- Encouraging personal therapy experience

3.3   STRUCTURE OF TRAINING

Phase One

Organized training

Basic Intensive Training (BIT)   – 4 days –   30 hours

Basic practicum – (BP) 10 practicums   –   75   hours

Advanced Intensive Training (AIT) – 4 days –   30 hours

Advanced practicum – (AP) 10 practicums –   75 hours

Certification Process (RTC)   – 4 days   –   30 hours

Phase I.

240 hours

Phase Two

Organized training

3.year

Workshop: CT/RT and psychological disorders I.   4 days - 30hours

Practicum I. – 4 practicum days   – 30hours

Workshop: CT/RT and psychological disorders II.   4 days – 30hours

Practicum II. – 6 practicum days   – 45hours

4.year

Workshop: CT/RT and working with groups   I.   4 days   – 30hours

Practicum I. – 4 practicum days   – 30hours

Workshop: CT/RT and group psychotherapy   II. 4 days   – 30hours

Practicum II. – 6 practicum days   – 45hours

Phase II.

345 – 405 hours

5.year

Workshop: CT/RT specific content   I. – 4 days   – 30hours

Workshop: CT/RT specific content   II. – 4 days   – 30hours

Group Supervision: 10 sessions   – 60hours

Additional activities outside of the organized trainings

Literature; preparation of the presentations

Individual supervision (case studies); peer supervision;

personal development through CT Focus groups;

Personal therapy; personal experience (plan for personal change,

diary, self-evaluation, portfolio)

Phase I+ II.

509 hours

Clinical practice under regular supervision   Phase I + II.

The practice is the base for candidate's experience from AP on   450 hours

Demonstration of psychotherapeutic competency   Phase II.

(Analysis of the case study, discussion)   20 hours

Proposed total sum of the organized training and education: 605 hours

Proposed total sum of the Additional activities: 509 hours

Total sum of the education without clinical practice: 1114 hours

Clinical practice under supervision: 450 hours

Total sum of training together with the hours of clinical practice   1564 hours

3.4 TRAINING CONTENT

PHASE ONE

FIRST YEAR

MODULE – I

Module One is designed to familiarise trainees with the basic concepts of Choice Theory (CT) and Reality Therapy (RT). During this Module, there is a combination of lectures, demonstration role-plays, practice, experiential exercises, and discussions:

BASIC INTENSIVE TRAINING

a) About the author Dr. William Glasser

b) History and development of Reality Therapy (RT) and Choice Theory (CT)

c) Understanding human behaviour: linear and circular causality

d) Choice Theory – understanding human behaviour through circular causality

e) Sci3ence and philosophy supporting CT (James, Lorenz, Powers, Lipton, Marken, Maturana, Varella, Kant, Aristotle)

f) Basic concepts of CT (Total behaviour, Needs, Quality world)

g) Organism as a closed system

h) Motivation

i) Perception

j) Frustration

k) Importance of choice in CT (conscious choice and creativity)

l) Basic beliefs about human behaviour (external control psychology – Choice Theory)

m) Understanding relationship in Choice Theory

n) CT axioms

o) Personality within CT

p) CT compared to other psychological theories

q) RT and how we practice it

r) CT as theoretical foundation for: psychotherapy, counselling, wellbeing, mental health, lead management and quality school

s) Introducing WGI, EART, EIRT, national RT organisation and EAP

t) Practical training: exercises, role-play, demonstrations conducted by trainers, discussions

u) Entry discussion

v) Literature suggestions

w) Education overview and organisational questions

The training is conducted using Lead Management and Quality School principles.

MODULE – II

BASIC PRACTICUM SESSIONS (10**)**

The purpose of the ten Basic Practicum Sessions is to assist the trainee to test out his/her knowledge and understanding of CT and to become more familiar and comfortable with Choice Theory, Reality Therapy Quality School and Lead-management. Emphasis is placed on trainee's personal experience. The practica are organised and carried out as a CT focus-group.

REQUIRED ADDITIONAL ACTIVITIES (See Appendix A)

a)   Written Examples (6)

b)   Individual Work with Supervisor

c)   Intervision (Peer Group Work)

d)   Other Personal Experiences

e)   Literature Review

<u>SECOND YEAR</u>

MODULE – III

ADVANCED INTENSIVE TRAINING

The Advanced Intensive Training programme is designed primarily to afford the trainee an opportunity to study Dr. Glasser's concepts in socio/psychological problems in much greater depth and to develop professional skills for psychotherapy. There is more time allotted to personal experience in role-playing and conscious self-evaluation. During this training, trainees deepen their understanding and CT beliefs in function of the psychotherapeutic process. The content of the training:

a) Reality Therapy (RT):

RT as a systemic-evolutionary psychotherapeutic approach

Understanding the RT goal

Therapist's role in RT

Formulation of client's difficulties through CT

Creative behaviours and RT

Importance of equilibrium in RT

Client's beliefs in the context of frustration

Importance of relationship for client's equilibrium

Importance of relationship in the therapeutic process

Importance of connectedness and trust in RT

Purpose of active listening in RT

Directness and confrontation of beliefs in RT

Conscious self-evaluation in therapeutic process

Metaphors, stories, paradox, humour and related in RT.

b) RT application and various difficulties

Participants participate fully in role-playing as the therapist, client or feedbacker and practice RT with clients with various difficulties.

c) Understanding RT compared to other approaches

Psychodynamic, Humanistic-Existential, Cognitive-behaviour approach.

d) Applications of CT in diverse contexts

Therapy, Education, Mental Health and Management

e) Guidance in counselling and psychotherapy

Theoretical, Practical and Ethical issues

f) Multicultural dimensions of CT and RT

g) Ethics in psychotherapy and counselling

h) Practical training: exercises, role-plays, demonstrations, discussions

MODULE – IV

ADVANCED PRACTICUMS SESSIONS (10)

Advanced Practicum Sessions offer the opportunity to trainees to practice through role-play with clients who have various difficulties. Emphasis is placed on trainee's personal experience.

In this Module more time is allotted to role-playing and processing of the role-plays. The final written assignment is profound self-evaluation of the whole training in Phase One and of the plan for changes in an important relationship which has been made at the beginning of Phase One.

REQUIRED ADDITIONAL ACTIVITIES (See Appendix A)

a)   Written Work and Case Studies

b)   Individual Work with Supervisor

c)   Intervision (Peer Group Work)

d)   Personal Psychotherapy

e)   Other Personal Experiences

f)   Literature Review

MODULE – V

CONCLUSION OF PHASE ONE

After the successful completion of the Advanced Practicum Sessions, the trainee is recommended by the teaching faculty to attend The Conclusion of Phase One, which comprises of:

PRESENTATION

The trainee demonstrates his/her understanding by making a presentation on an aspect of RT/CT application, and can improve it through feedback from his/her peers and from the teacher.

DEMONSTRATION OF RT SKILLS

Each trainee is involved in role-play so s/he can demonstrate his/her skill in applying CT with diverse clients.

GROUP SUPERVISION – DEALING WITH FEEDBACK

Each trainee demonstrates his/her skills in offering feedback and dealing with feedback from the colleagues and teachers.

CO-VERIFICATION

The trainee participates in co-operative self-evaluation with the teacher assessing his/her advancement through training and the areas where s/he has to work on additionally.

The Conclusion of Phase One is the recognition that a trainee has acquired basic Choice Theory ideas and is using them in their professional and personal life.

<div style="text-align:center; border:1px solid black; display:inline-block;">**PHASE TWO**</div>

THIRD YEAR

Modules VI, VII, VIII, and IX (workshops, practicum sessions and additional activities) are designed to enable advancement of psychotherapeutic skills with diverse clients with different difficulties. Content is designed to facilitate deepening candidate's theoretical knowledge of CT/RT and its position among other psychotherapy approaches.

MODULE – VI

PCP I. WORKSHOP: CT/RT – PSYCHOLOGICAL PROBLEMS I

a)   Reality Therapy (RT) as systemic-evolutionary approach

b)   Mental health model in RT compared to the medical model

c)   View of RTP on difficulties listed in the current version of DSM

d)   Formulation of client's difficulties as an alternative to psychiatric diagnoses

e)   Understanding purpose of symptomatic behaviours of the clients

f)   RT with clients referred to the psychotherapist

g)   The role of psychotherapist in RT

h)   Film analysis

i)   RT and CT in comparison with other prominent psychotherapeutic approaches

j)   CT and RT specific content requested by participants

k)   Ethical questions in RT

l)   Preparation for the upcoming practica: role play, demonstrations, analyses, discussions

m)   Initial consultation about continuing the education

MODULE – VII

PRACTICUM SESSIONS (4)

The module is designed to give the candidates, through exercises, role-plays, demonstrations, analysis, and discussions, the opportunity to experience the psychotherapeutic relationship with clients. In this process they deal with clients with behaviour relates to diagnoses in the current issue of the DSM.

ADDITIONAL ACTIVITIES (see Appendix A)

a) Supervised, Written Case Studies

b) Individual Work with Supervisor

c) Intervision (Peer Group Work)

d) Personal Psychotherapy

e) Other Personal Experiences

f) Clinical practice

g) Literature Review

MODULE – VIII

PCP I. WORKSHOP: CT/RT – PSYCHOLOGICAL PROBLEMS II

a) Understanding raising children from CT perspective

b) RT with clients who seek therapy for difficulties they have with children

c) RT with adolescents who have difficulties with their parents

d) Counselling- leading and role of the therapist

e) Partner/spouse relationship from CT perspective

f) RT and difficulties in partnership and family relations

g) RT with couples

h) Therapist role in working with couples

i) Film analysis

j) Ethical questions in Reality Therapy

k) Preparation for practical training: role-plays, demonstrations, analysis, discussions

MODULE – IX

PRACTICUM SESSIONS (6)

The module is designed to give the candidates, through exercises, role-plays, demonstrations, analysis and discussions, the opportunity to experience the

psychotherapeutic relationship and skills with clients coming, or being sent for some reason, to psychotherapy.

ADDITIONAL ACTIVITIES (see Appendix A)

a)   Supervised, Written Case Studies

b)   Individual Work with Supervisor

c)   Intervision (Peer Group Work)

d)   Personal Psychotherapy

e)   Other Personal Experiences

f)   Clinical practice

g)   Literature Review

FOURTH YEAR

The Fourth Year contains Modules X, XI, XII, XIII (workshops, practicum sessions and additional activities) with the main emphasis being working with groups. Work is comprised of theory, personal experience of diverse groups, practical group work and skills for leading group therapy.

Candidates develop sensitivity for the position of individuals in group setting, group processes and group development. Through that they gain skills to lead different groups. By role-playing groups of clients they gain skills for group RT.

MODULE – X

PCP II. WORKSHOP: CT/RT -- AND WORKING WITH GROUPS I

a)   Group definitions

b)   General theories of groups

c)   Understanding development and group processes through CT

d)   Different types of groups and CT

e)   Group leader role and CT

f)   Participation and leadership in "CT groups" training

g)   Film analysis

h)   Demonstration of CT group moderation

i)   Ethical questions in working with groups

MODULE – XI

PRACTICUM SESSIONS (4)

Through demonstrations, exercises, role-plays, feed-back, analysis and discussions the candidates get the experience of group participation and skills to lead different types of groups including the 'CT group'. Candidates develop sensitivity for group processes and group development. They also sensitise for the dominant ways in which participants satisfy their basic needs in various stages of group development.

REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)

a)   Supervised Reflections and Written Case Studies

b)   Individual Work with Supervisor

c)   Intervision (Peer Group Work)

d)   Personal Psychotherapy

e)   Other Personal Experiences

f)   Clinical practice

g)   Literature Review

MODULE – XII

PCP II. WORKSHOP: CT/RT – AND WORKING WITH GROUPS II

a)   Purpose of the group RT psychotherapy (GRT)

b)   Forming a group for GRT

c)   Conventional psychopathology in light of CT and in the GRT context

d)   Theory of change in RT

e)   The role of RTP in group therapy

f)   Group therapy compared to individual therapy

g)   GRT demonstration

h)   Participation and group therapy leadership - training

i)   Ethical principles and GRT

MODULE – XIII

PRACTICUM SESSIONS (6)

Through demonstrations and experience of Group Reality Therapy, exercises, role-plays, feed-back, conscious self-evaluation and discussions the candidates get the experience and skills for group therapy. The candidates get the opportunity to experience connecting with every group member, how to support the connectedness among the clients in the group. They also develop skills of confronting with their CT beliefs which enables group members to change their traditional beliefs with new ones, which is the goal of RT.

ADDITIONAL ACTIVITIES (see Appendix A)

h)   Supervised Reflections and Written Case Studies

i)   Individual Work with Supervisor

j)   Intervision (Peer Group Work)

k)   Personal Psychotherapy

l)   Other Personal Experiences

m)   Clinical practice

n)   Literature Review

FIFTH YEAR

Fifth Year comprises Modules XIV, XV and XVI (workshops, group supervison sessions, demonstration of psychotherapeutic competency)

MODULE XIV

PCP III WORSHOPS

SPECIFIC CONTENTS I (optional)

Workshops offer topics that candidates perhaps did not go over enough in the previous education or training programme and need to study more intensively.

SPECIFIC CONTENT II (optional)

Continuation workshop offers additional topics that candidates perhaps did not go over enough in the previous training programme and need to study more intensively.

MODULE – XV

GROUP SUPERVISION SESSIONS (12)

Twelve Group Supervision Sessions offer to candidates the supervision of their clinical practice.

MODULE – XVI

DEMONSTRATION OF PSYCHOTHERAPEUTIC COMPETENCY

To demonstrate the psychotherapeutic competency candidates send the Application for a demonstration of psychotherapeutic competences to the EIRT .

Application for demonstration of psychotherapeutic competences include: statement of the candidate that s/he has completed all the standards of education for becoming PRT, the name of the chosen mentor for the final thesis, candidate's estimate of the time frame for final thesis and attending the demonstration.

With the application, a candidate submits all required documentation in electronic form:

a) folder with the documents of the third year of the training,

b) folder with the documents of the fourth year of the training,

c) an updated electronic Training Record

d) a duly completed forms to graduate PRT by EART ,
e) a duly completed forms to obtain the ECP by the EAP ,
f) Training Record (booklet) provided with signatures of the faculty

For the demonstration the candidate prepares a final thesis, which contains the following elements:
A. Personal information
B. Self-evaluation of personal development during the reality therapy training
   The motivation for choosing the program to obtain the title PRT
   Personal experience during the training
   Personal capacities for practicing psychotherapy

C. Case Study:
   Introduction

Description of work with client
Conclusion

D. Literature

The demonstration of psychotherapeutic competency is public. The candidate presents to the Demonstration Panel:

a)   His/her professional development in Reality Therapy

b)   A Case Study: Complete description and analysis of work with one client from beginning to end of the therapy.

4. EVALUATION and ASSESSMENT

4.1. ASSESSMENT PROCEDURE

Training in reality therapy psychotherapy is based on the trainee's self-evaluation and verification of competence with the supervisor and group members. At the end of each year of the training process, the trainee is harmonising with the supervisor about his/her development, and gets the recommendation to continue the training. If he/she is not ready to move to the next stage of training, the supervisor will help him/her to make a plan of working to get ready. The competence verification process then repeats.

There is particular emphasis on co-verification before starting Phase Two of training, and before Final Demonstration of Psychotherapeutic Competency.

4.2 PHASES OF ASSESSMENT PROCEDURE

In the RT training program verification is carried out at the end of each year, and in particular at the end of Phase One and Phase Two.

4.2.1 PHASE ONE:

Basic Intensive Training*:* Self evaluation, verification of competence, recommendation by supervisor, Initial Consultation with recommendation

Advanced Intensive Training*:* Self evaluation, verification of competence, recommendation by supervisor

Certification Process*: Demonstration, self-evaluation, verification of competence, recommendation by the teacher,

4.2.2 PHASE TWO:

Pre-entry:

Written self evaluation,

Recommendation from Faculty member from Phase One Training Programme

Initial consultation with recommendation

In-training:

At the completion of each year of training:

- Self-evaluation
- Verification of competence
- Recommendation for supervisor or teacher

4.2.3 FINAL DEMONSTRATION OF PSYCHOTHERAPEUTIC COMPETENCY:

Following the successful completion of Module XV of the Training Programme the candidate chooses a mentor from amongst EIRT Faculty to help the candidate prepare for the Final Demonstration. This is again a process of self-evaluation, verification of competence with the mentor and recognition by the Nomination board. Based on candidate's individual application for each candidate, the Faculty board leader will appoint the Nomination board. Nomination board members are appointed among the members of the Faculty board who are involved in the psychotherapy training.

V The role and tasks of the Nomination board:

a) Review of the documents sent to the candidate when applying
b) Review the final thesis of the candidate
c) In collaboration with the mentor give a the feedback on final thesis and the recommend candidate to present psychotherapeutic competency at the demonstration

When the candidate, the consultant and Nomination board concur that the candidate is ready, he/she receive the invitation for demonstration of psychotherapeutic competency.

Demonstration of psychotherapeutic competency demonstration takes place before the Demonstrational Panel. The Director of EIRT appoints the Demonstrational Panel and it consists of three members EIRT faculty members.

4.3 CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

All RTP are required to support quality and ethical practice with obligatory 'Continual Professional Development' (CPD). They are required to complete an average of 50 hours per year of CPD (total of 250 hours over a period of the last 5 years).

This CPD can be taken in the following forms:

a)   advanced or additional professional psychotherapy courses;

b)   regular professional supervision for psychotherapy practice / clinical / group work and peer supervision

c)   psychotherapy conference / symposium attendance

d)   professional activities in psychotherapy (e.g. being elected to a board or a committee and attending meetings)

e)   participation in extra psychotherapy training as a supervisor / instructor / researcher

Minimum 250 hours shall consist of no more than 75 hours from any one category.

5. REALITY THERAPY PSYCHOTHERAPY TRAINING FACULTY

Teachers have different roles within the RT psychotherapy training. Training standards for the faculty and criteria for taking on different roles within training process is regulated within the EIRT Book of Regulations for Faculty Training

6. TRANSITIONAL AND FINAL PROVISIONS

6.1 According to its needs, EIRT reserves the right to change this BoR at any time.

6.2 This BoR applies to all training participants regardless at what time they've started their training.

6.3 The BoR will be published on the EART website.

 Kranj, 7.12.2017

APPENDIX - A

SHORT DESCRIPTION OF REQUIRED ADDITIONAL ACTIVITIES

Written examples in the Phase One (3 hours/example)   **18 hours**

There are 6 written assignments at Basic Practica - BP. The first two of these are based on Dr. Glasser's books "Control Theory" and "Choice Theory" which should be read before basic practicum starts. Participants write about their understanding of Glasser's ideas in these books, personal experience they were thinking about while reading and dilemmas and questions regarding the reading material. Three of the written assignments are based on everyday life frustrations in relationships by trying to analyse them using CT. The final one is profound self-evaluation based on the whole year's work in training and the plan for personal change which has been set at the beginning of the practicum. Participants send one example to the supervisor before each practicum session by e-mail. This is an opportunity for the supervisor to improve the relationship with the participant and to model CT principles. The supervisor reviews the participant's written examples and prepares a written answer to it by sharing his/her comments, suggestions, personal experience and ideas.

Written examples and case studies (5 hours per case study) **30 hours**

There are 6 written assignments at Advanced Practica (AP). The first two of them are based on Dr. Glasser's books "Reality Therapy in Action" and "Warning: Psychiatry Can Be Hazardous to Your Mental Health" which should be read before advanced practicum starts.

Candidates write about understanding Glasser's ideas in these books, personal experience they were thinking about while reading and dilemmas and questions regarding the reading material.

Three of the assignments are case studies based on work with clients. Candidates analyse the client's situation using CT and describe how they use CT in therapy – the New Reality Therapy. The final assignment is profound self-evaluation based on the whole year's work in training and the plan for personal change which has been set at the beginning of the practicum. Candidates send one example before each practicum session by e-mail. The supervisor reviews the candidate's written examples and prepares a written answers to it by sharing his/her comments, suggestions, personal experience and ideas.

Supervised case studies in Phase II. (10 hours per case study) **120 hours**

There are 6 written case studies at PCP I. and 6 of them at PCP II. Unlike case studies at AP candidates choose the client for the case study in consultation with the supervisor. A case study at this level is much more profound. It consists of the description of the client's situation, analysis of it using CT and a short review of several sessions so that progress can be evident. During the preparation of a case study the supervisor offers his/her help and support.

After the case study is prepared the candidate discusses it with the supervisor individually (see individual work with supervisor).

Analysing literature and preparing for presentations/lectures   150 hours

Beside the books– already mentioned, all other publications from the CT/RT field are recommended to be read as well as books and written material regarding specific topics in PCP I., II. and III. (psychosomatics, psychosis, addiction, etc; group work, ethics, review of different psychotherapy approaches, etc.)

Candidates usually prepare their presentations for the practicum from CT/RT publications. If they decide to use books from any other field the presentation should be adjusted and explained through CT.

Intervision -peer group work (16 hours /year for 5 years)   **80 hours**

At the beginning of training candidates are asked to put in some extra effort and to meet without the supervisor between practicum sessions. We call it peer supervision or peer review. It is an opportunity for candidates to share experiences, learn from each other focused on CT and improve their relationships. It helps them sometimes to identify and later address with the supervisor some important questions. Peer review is very important personal experience.

Individual work with supervisor (9 hours/year through 4 years)   **36 hours**

Working with the supervisor begins at the same time as BP and lasts until Fourth Year. Candidates have an opportunity to work with the supervisor who is leading the practica individually based on the written studies they are sending in. For every case study participants have 1.5 hours of individual work with the supervisor.

Personal therapy (during 5 years)   **25 hours**

Our training demands profound personal change from the participant. This leads to transformative change in beliefs, in ways of thinking and of perceiving self and the world, which directly impacts on the participant's mental health. This means that the training itself is in fact a process of self-therapy. We also require our trainees to attend personal therapy of 25 hours duration during the 5 years of training. Participants choose a personal therapist who has to be accredited by EIRT as a psychotherapist for personal therapy. A candidate may not choose a personal therapist who is his/her teacher or supervisor in any phase of the training.

Other personal experiences: (action plan, journal, personal portfolio) **50   hours**

In addition to the personal experiences already mentioned, the candidate at the beginning of the training programme sets out a plan of personal change which focuses on at least two important relationships that the candidate evaluates to be in need of improvement in his/her life. The candidate makes a plan to improve those

relationships using CT. S/he writes about the plan and its realisation in a diary so s/he can follow up her/his own personal development. The candidate uses the diary to take other relevant notes as well as collect important documents for a portfolio. All of this is used for the final self-evaluation and verification of competencies.